TO: Government Accountability Board Wisconsin (official with whom normalization of candidacy for the office in filed)				
We, the undersigned qualified electors of the	ticial Alth Agrees both related bakers on necessarion of	trict () ISCONSI	<u>a.</u>	
•		Oth District from	office pu ទបណ្ដ	
petition for the recall of State Sene	(name of afficeholder to be recalled and office)	-	 -	
to Article XIII, Section 12 of the Wisconsin Co		// 'All.		
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Nicholas B Goillic	112 N. Chestnut Ave	13:3/如ega ~ ~ シバイビル 「	03/11/11	
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5. The Cun-		OCHY 5771)	'	
6. Vultural Miller.	3425 Edinburgh Rd.	DITOWN 54311 DIVERGE Greenbay, WI	3/11/11	
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1) and To	Certification of Circulate	OF certify	<u>.</u>	
I, (man of corpulation) + Garage Gallery 1201				
I reside at (circulator's residence - Include number, street, and municipality)				
I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date 'uticated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishably under				
opposite his or her name. I know then respective as S. 12,13(3)(a), Wis, Stats.		WASTA !		
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EB-170 (Rev. 7/2003), page no. box added \$12003). The information Tains form is prescribed by the State Elections Board, P.O. Box 291 608-266-2005, http://elections.state.wi.us	n on this form is regulated by Sx. 8.40 and 9.10, Wis. State. 13, Madison, WI 53701-2973	Page No	1901	

TO: Government Ac	RECALL PETITION Countability Board Cital with whom normanistic propers or declaration of candida.	Wisconsin		
We, the undersigned qualified electors of the	IEMI DAN MANAGEMENT CONTRACTOR	Frict WISCONSI	<u> </u>	
pelition for the recall of State Seng	tor Dave Hansen 31	Oth District from	office pu svant	
to Article XIII, Section 12 of the Wisconsin Con	nslitution and S. 9.10 of the Wisconsin Stat	utes.		
to Afficie Am, Beetlon 12 or the	TATEMENT OF REASON FOR RE	CALL	responsibilities of	
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(dale) EB-170 (Rev.7/2003, page no. box sadded 8/2005) The informal	on on this form is regulated by Ss. 8 AD and 9.10, Wis, Stats.	(signature of circulator) Page N	10. 19/102	
EB-170 (Rev. 7/2093, page no. box used a 22003) And united This form is prescribed by the State Elections Board, P.O. Box 22 608-266-8005, http://cleetions.state.vi/us	973, Madison, WI 53701-2973	<u> </u>	1100	

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608-266-2005, http://elections.state.wi.us	EB-170 (Rev. 7/2003, page no. box nobled 8/2005) The information This form is prescribed by the State Elections Board, P.O. Box 2973	on this form is required by Ss. 8,40 and 9,10, Wis. Stats.	-	1903	

TO: WISCONSIN GOVERNM	1ENT ACCOUNTABILITY fficial with whom nomination papers or declaration of candid		
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE	•	,
petition for the recall of DAVE HANSE		•	office pursuant
to Article XIII, Section 12 of the Wisconsin Co	·		
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	STATEMENT OF REASON FOR RI city, village, town, and school district officials. I to initiate the recall of state, congressional, leg	The reason must be related to the official	responsibilities of
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2 bulleth	806 Winford AVE	Town Village of the boy	3/20/11
3 Hours Smith	2505 Jenny Lane 3	O Town O Village O City O City	3-20-11
4. Dhamme Soile A	125 5. Agriand	o Town O Village Green Bay	3-20/11
5. Tanal & Mederick	125 3. Ashland	Town O Village O City O Creen Rou	7=20-
Kin Dodall	1031 Division St	Town Village (700 m BA)	72011
25 chia Carrellon	1119 CRESTWOOD DR	O Town GREEN BAY	3/20/11
8 m	WZZ80 Jarmy Lane	Scrity Scrity Scrity Syllage Wange He	3-20-4
9. Juday Johnd	Na 240 Jenny Lan	Stown Village Warinest	3-120-1
10. Dur Bak	484 Belan St.	Stown Crew Bay, WI.	3-20-11
1,5HGRU FGRREL	Certification of Circulato	or	<u> </u>
I reside at 224 BERKSHIRE DROOM FU 32922. (circulator's residence - include number, street, and municipality)			
I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under			
§.12.13(3)(a) Wis. Stats.	Sherr	JEJ6212	Se O
(date))	(5)	gnature of circulator)	

This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8005, http://gab.wi.gov email: gab@wi.gov

TO: Government Accountability Board Wisconsin (official with whom nomination pages or declaration of candidacy for the office is filed)				
We, the undersigned qualified electors of the	30th Senate Dis	trict Wisconsi	<u>n</u>	
petition for the recall of State Sens			office pu want	
to Article XIII, Section 12 of the Wisconsin Co	nstitution and S. 9.10 of the Wisconsin Stat	utes.		
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	to initiate the recall of state, congressional, reg	he reason must be related to the official islative, Judicial, or county officials.)		
Serious, gross, neg for work.	lect, of Duty, for	Failing to show	<u> </u>	
THE MUNICIPALITY USED FOR MAILING	Purposes, when different than mun	ICIPALITY OF RESIDENCE, IS NOT	UFFICIEN	
THE NAME OF	THE MUNICIPALITY OF RESIDENCE MUST	ALWAYS BE LISTED.		
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Yillago	DATE OF SIGNING	
	Rural address must also include box or fire no. 1420 KATERS DR			
1. John W. Navance	GB 54304	orown ornage Green Bay booky	2-27-11	
2. Pam Pilato _	2886 WIST POINT ROL 6-13 54313	O Town O Vitage (3) 13 of City	2-28-11	
3. Stave Pulato	Green Bay	D Town D Village (7 BAY D City (5 BAY	2-28-2011	
Connad Liettyka	6B, WI	I Town I Village 68 Sea City	2/28/2011	
5 Mildred Jane Neverman	3001 5. Webster apt 108	O Vilage allower	4/6/2011	
6. Jan Shillion	Green By 1865	De Town O Williage O City O City O City	13 Don	
Ferry Phillips	Cover 1823 54311	Sylown O'Nage HOWSOLD+ O'Ny O'Ny O'N	비원	
8. Roger Shybork	1947 Elouak Ct	Oron L. Boy	4/2/2011	
"Catherine Daybaski	1947 Selemarka	O VINAGE STEEN BOY BY CITY	14-27-11	
10, U		U Vilago		
. Cynthia Nan	Certification of Circulate	r, cerlif	y:	
I reside at 1676 Lang (anne of pirculator) Ave. Green Bay, W1 54304				
I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the Jurirdiction or district represented by the officebolder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or hexpame. I know their respective residences given. I support his recall petition. I am aware that falsifying this certification is punishable under S. 12.13(3)(9), Wis. Stats.				
(dg/c) EB-170 (Rev.7/2003, page no. box added 8/2005) The information This form is prescribed by the State Elections Board, P.O. Box 297, 608-266-8005, http://elections.state.vvi.us	on this form is regulated by Ss. 8.40 and 9.10, Wis, Stats.	gnature of eleculator) Page No	.1905	

TO: WISCONSIN GOVERNO	MEINT ACCOUNTABILITY Official with whom nomination papers or declaration of cand	BOARD	
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE	SENATE DISTRICT or district of officeholder)	_ _
petition for the recall of DAVE HANSE	(name of officeholder to be recalled and office)	والأحد سسالي	n office pursuant
to Article XIII, Section 12 of the Wisconsin Co		itutes.	
(The reason for recall must be stated on petitions for	STATEMENT OF REASON FOR R city, village, town, and school district officials.	The reason must be related to the afficient	d responsibilities of
the officeholder. No statement of reason is required	to initiate the recall of state, congressional, le	gislative, judicial, or county officials.)	
THE MUNICIPALITY USED FOR MAILING THE NAME OF	G PURPOSES, WHEN DIFFERENT THAN MUS THE MUNICIPALITY OF RESIDENCE MUS	NICIPALITY OF RESIDENCE, IS NOT : T ALWAYS BE LISTED.	SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Gaig Pienta	1319 N- Timber to	Stown Village SU 2M / CO	4/8/11
DAVIEL CLARY	1482 UNITEDSITY	O Town COSON BA	4/8/11
3. Titary Taylor	\$30 Lime koun Col	Grown Grown Grown Green Provi	4-9-11
"Dane act	BUG Trenest	© Town © Village (Sective B	4-9-11
5. Mhsta Dlank	1490 main St Gr Bay WI 94302	Town Utiliage Society B B B B B B B B B B B B B	4-9-11
6. Some Black	1735 12 th for	O Town O Sylfage Se City O Town	a /9/11
Michael Numbers	3005, 914	O Town O Village Oe Pere	4/1/11
Debra Pierquet	1827 Doblon St	O Town O Village Liseen Say	21.9.11
9. Casso Riesynt	1917 Gross Aur	D Town Uvillage Decity Green Bay	4-9-11
10. John	1532 N. Irwin	O Town O Village O Creen By	4-9-11
in III Da	Centification of Circulato		
I reside at 90 S R Clean	ne of circulator)	, certify	:
(çi cul:	ator's residence - include number, street, and municipality)	0(440	<u> </u>
I personally circulated this recall petition and personal district represented by the officeholder named in this opposite his or her name. I know their respective resid §.12.13(3)(a), Wis. Stats.	DCIIIION. I KNOW iliai each neison aigned the As	arte urith full knowledge of its sesses s	المناليا بمتلا مناميا
491		at tout	
(date) GAB-170 (Rev.6/2007) The information on this form is required by this form is prescribed by the Government Accountability Board, P.C 608-266-8005, http://gab.wi.gov email: gab@wi.gov	88 R40 and 9 to Wis State	Page No.	1906

TO: Government Ac	RECALL PETITION COUNTABILITY BOARD icial with whom nomination papers or declaration of candida	Wisconsin ey for the office is filed)	
We, the undersigned qualified electors of the	30th Senate Dis	Hrict WISCOR	<u> </u>
petition for the recall of State Seng	tor Dave Hansen 3 (name of office holder to be recalled and office)	oth District	from office pu suant
to Article XIII, Section 12 of the Wisconsin Cor	nstitution and S. 9.10 of the Wisconsin Stat	ules.	
S' (The reason for recall unust be stated on petitions for a the officeholder. No statement of reason is required to	TATEMENT OF REASON FOR RE	CALL The regson must be related to the off	Acial responsibilities of s.)
Serious, gross, neg	lect, of Duty, for 1	Failing to sho	ω υρ
The second secon	PURPOSES, WHEN DIFFERENT THAN MUN	ICIPALITY OF RESIDENCE, IS N	ot Sufficient.
THE MUNICIPALITY USED FOR MAILING THE NAME OF	THE MUNICIPALITY OF RESIDENCE MUST	AUTA TO DE DISTEDI	
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENC Indicate Town, City, or Village	B DATE OF SIGNING
1. St. Ma PK1	Rural address must also include box or fire no. 1861 Pinewood Tr Suamto, wi 54713	Brown Suamko	ala7
2. hadra Vanta	1861 Pinewood Tr Sumild 1 W + 54173	D Town D VINAGE SUD MILO	2/27
3. Aun (astice)	170 S. FISK St #23 Grown Bau WI 54323	Trown Preen Bour	2-28
And Colester	(see) Bay wt 543,4	D TOWN D VILLEGE Cor EQN BOLL	2-28
Forlers Hermick	4096 Solamos	Town CAFEN 6NY	2-28
6 avis Ros	MID 91 ST 42 VicenBay SYDY	O Town O'lea Buy	2-28
Thitesen Out	25395 Tellovide TIL	D Town N Wilage City Cyreen Bay	2-28
8. July a Sahult	1530 Konnedyll	Town UNBERGE GREEN BRILL	2-38
Parl W. Klebryson	1411 Sentrus St.	D TOWN D YIVAGE AND BOUT	2/28
10. Quanta a Cendusor	Green Bdy W 54305	10 Village Oreen Ba	4 2/28
· Luella R Ko	Certification of Circulate	or 	ertify:
Tresident 1861 Phews	ame of circulator) Storm(C) Storm(C) Storm(C)	0,WI 541	73
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective res S. 12.13(3)(a), Wis, Stats.	nally obtained each of the signatures on this pass petition. I know that each person signed the pidences given. I support this recall petition. I at		
EB-170 (Rev. 7/2003, page no. box added 8/2005) The information This form is prescribed by the State Elections Board, P.O. Box 297 608-266-8005, http://election.state.vi.us	n on this form is required by Ss. 8.40 and 9.10, Wis. Stats. 13, Madison, W1 53701-2973	Pa	ige No.

TO: WISCONSIN GOVERNA	RECALL PETITION MENT ACCOUNTABILITY	BOARD	
We, the undersigned qualified electors of the		SENATE DISTRICT	
petition for the recall of <u>DAVE HANS</u>	EN 30TH DISTRICT STATE S	or district of officeholder) SENATE OF WI from	office pursuant
to Article XIII, Section 12 of the Wisconsin C	(name of officeholder to be recalled and office) onstitution and §.9.10 of the Wisconsin Stat	tutes.	
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	STATEMENT OF REASON FOR Ricity, village, town, and school district officials. It to initiate the recall of state, congressional, le	The reason must be related to the official	responsibilities of
THE MUNICIPALITY USED FOR MAILING THE NAME OF	G PURPOSES, WHEN DIFFERENT THAN MUN F THE MUNICIPALITY OF RESIDENCE MUS	NICIPALITY OF RESIDENCE, IS NOT S	UFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
Milhon M. Hamilton	249 McKerizie Ln	Town Green Bay	4-9-11
2.7/6	424 S. Ashland Ave.	Drown Village Village Village	4-9-11
3. Littly forthis	8830, M. Mary CIT 140	Town Village StCity Col 7	4-9-11
4. Van Van	1740 Verlin RD =16	O Village GVECN Bay	4-9-11
5. Cindy Olan	RID E Mason &	D Town D Yillege Scrity CILLA CLU	4-9-11
6. alan Dur lin	1171 Chicago St Greenhay 54301	Town Uvillage Scify	4-9-11
1.621/M	GREEN BAY WE	O Town O Vallage So City	4-9-11
8. Tose Jamora.	1746 Harry Stail	□ Town □ Villege □ City □ C	4-9-11
9. Allresa	6333 (41KL) 5xb, e5/(5430)	Town Lyillage Sob, 05/	4-911
10. Baneses Avala	1539 Ellis St HUPPAY	S) Town 36 Vinage City	11-9-11
Malshour	Certification of Circulato	or	<u> </u>
I reside at PD 9 RCI I Colo	medicinculator) 125 Calaca	, certify	:
(ĉireu	lator's residence - include number, street, and municipality)	- 1\(\text{V}\)	·
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective resi §.12.13(3)(a), Wis. Stats.	petition. I know that each person signed the page	aper with full knowledge of its content o	n the date indicated
(date) GAB-170 (Rev. 6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, P 608-266-8005, http://gab.wi.gov email: gab@wi.gov	v \$8, 8.40 and 9.10, Wis. Stats.	parture of circulator) Page No.	1908

TO: Government A	RECALL PETITION Countability Board Ticks with whom north after paper or declaration of candid	Wisconsin		
We, the undersigned qualified electors of the	30th Senate Dis	Hrict Wiscons	in	
petition for the recall of State Sens			n office pu suant	
to Article XIII, Section 12 of the Wisconsin Co				
(The reason for recall unist be stated on petitions for the officeholder. No statement of reason is required	to initiale the recall of state, congressional, leg	The reason must be related to the official is included in the official is included in the official included in the official is included in the official included in the off	· · · · · · · · · · · · · · · · · · ·	
Serious, gross, neg	lect, of Duty, for	Failing to show	<u> </u>	
THE MUNICIPALITY USED FOR MAILING	PURPOSES, WHEN DIFFERENT THAN MUN	icipality of residence, is not	SUFFICIENT.	
THE NAME OF	THE MUNICIPALITY OF RESIDENCE MUST	ALWAYS BE LISTED.		
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
101010	Rural address must also include box or fire no. 2450 Woodlington Way	C) Town	0/2/2011	
"Undree Marty"	Suamico WY 54173	DON SUAMICO	3 3/2011	
2. Stal Mar-	SUMMICO WI 54313	Dicity Sugmica	3/3/2011	
3.	2057 Rock Bottom Ct GreenBay W1 54317	octy Green Bay	3/3/2011	
4. Steeler L. Marnon	GREENBAY W. 545	10 Town Backy Green Bay	3/3/2017	
5. Mary Marmon	3/14/RENTON UN GREENBAY 54313	Troon Green Bay	3/3/11	
6. Mary P Maryon	2057 Rack Bottom DreenBayall 54313	Drown Green Bay	3/4/11	
7. North	1370 Wellington Dr	O Youn	3/7/11	
8. Day fort	Summics W1 54173 1370 Wellington Dr Suamio W1 54173	C Town	3/9/1/	
9. Freserick Destines	1604 Carol Ave	Dylinge C. Ca Oh Ray	3/9/11	
10.77.71	Green Bay Wi 54304 914 Tommark St.	D Town	3/7/11	
Casta Neimerman	Green Bay, 54304	Draw Gleen Bay		
i, Lucia R Korrification of Circulator certify:				
[reside at 186] PINEUDUATE SUAMICU, WI 54173 (clrouleton's residence - Include number, street, and municipality)				
I personally circulated this recall petition and person district represented by the officeholder named in this	r seliture. I know instreach netson signen (de f	JRYCL WITH TOTAL KIND A HEADER OF 123 CO. 124-14	Off Statement and and and an article	
opposite his or her name. I know their respective resists 12,13(3)(a), Wis. Stats.	REIRES BIYEII, I SUPPORT UND TECHNI PEDUCIT. I A	RKME	· >	
- 5/14/2CU	-	alguature of circulator)	ITAN	
EB-170 (Rev.7/2003, page no. box added \$/2005) The information	of this form is required by 51. SAU and Y.IV, WH, 514LL	Page N	" (40% 1"/V	

This form is prescribed by the State Elections Board, P.O. Box 2973, Madison, WI 53701-2973 608-266-8005, http://elections.state.wises

TO: <u>Wisconsin Governm</u>	ENT ACCOUNTABILITY I ficial with whom normination papers or declaration of candida	BOARD cy for the office is filed)	
We, the undersigned qualified electors of the			,
	(jurisdiction or	district of officeholder)	
petition for the recall of DAVE HANSE	(name of officeholder to be recalled and office)	ENIATE OF WI from a	office pursuant
to Article XIII, Section 12 of the Wisconsin Co.	•	ites.	
	TATEMENT OF REASON FOR RE		
(The reason for recall must be stated on petitions for	city, village, town, and school district officials. T	he reason must be related to the official r	esponsibilities of
the officeholder. No statement of reason is required	to initiate the recall of state, congressional, legi	islative, judicial, or county officials.)	
		· -	
			•
THE MUNICIPALITY USED FOR MAILING	PURPOSES, WHEN DIFFERENT THAN MUN	ICIPALITY OF RESIDENCE, IS NOT SU	IFFICIENT.
THE NAME OF	THE MUNICIPALITY OF RESIDENCE MUST	ALWAYS BE LISTED.	
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF SIGNING
	Rural address must also include box or fire no.	Indicate Town, City, or Village Town	_ (
1. Nyan Makan	246 Linder on Ret 129	Willage Grey Day	3/19/11
2/1 - (2) 1 - (1)	900 General St	□ Town	alie Lix
² Cassondra Alien	GB 32136Cf	□ Village 6/3 □ City	3/17/11
3. Went Scott	Bul lilar Rch	Town	3/19/11
5047	1854 Rockner Die	D City C C	-
4. John Oson	7837 10001147 200	U Village Grean Bas	3/20/1/
5. 4 //1	989 Ho 1302 St	□ Town	-1 1
May h Chu	03	Village GB	3/20/11
6. 1	1024 Harvey St	□ Town □ Village	8/2 /1
Jeri Debelo	GREED BAY	Sd-€ity G ")	9/20/11
7.	2048 Langlade	© Town □ Village	2/22/4
(Jule Van Janner	(Freen Bay W) 54303	□ City 7).	ojaoju_
8.	14/11/21	Ma Village _ •	3/2011
Cornslew Vanntentin	1410 RIVERSIDE	City Suam! Co	
Mali Alella	1925 Wester	U Village 3 3	3/2011
1000 1 120		P Town	90/1
Muzil Volances	102 C/Ay	City 6 /3	20/3/11
	Certification of Circulato		
ISHGRRI FORRY	LL	, certify	<u>:</u>
へんさ どっしょくさ	ame of circulator)	E1 32020	
Treside at 224 DERESH	lator's residence - include number, street, and municipality)	- I - Dayaa	<u> </u>
I personally circulated this recall petition and person	ally obtained each of the signatures on this par	per. I know that the signers are electors of	of the jurisdiction or
district represented by the officeholder named in this	petition. I know that each person signed the p	aper with full knowledge of its content of	n the date indicated
opposite his or her name. I know their respective resi §.12.13(3)(a), Wis. Stats.	dences given. I support this recall petition. I an	a aware that faishying this certification is	hamsnaoic anact

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.

This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov_email: gab@wi.gov

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY Ticial with whom nomination papers or declaration of candid			
We, the undersigned qualified electors of the	30TH WISCONSIN STATE	•		
petition for the recall of DAVE HANSE			office pursuant	
to Article XIII, Section 12 of the Wisconsin Co	nstitution and §.9.10 of the Wisconsin Stat			
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	TATEMENT OF REASON FOR RI city, village, town, and school district officials. to initiate the recall of state, congressional, leg	The reason must be related to the official	responsibilities of	
	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		UFFICIENT.	
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING	
1. ames Mitchell	816 Rober St Chein, Baylus	O Town Green Bay	3-20-11	
2. Cindy Massry	Sulva Sione	O Town O Village Af City	3-22-11	
3. Kingan Saniay R	1419 Seam Same	D Town D Village D City	3-22-11	
4. Whateland	C326 Decan 45	O Town O Village	522-M	
5. L. Homes Gratis	2416 Hu 137.	Town Nillage PINSTIELD City	3/2/11	
6. N. piss	GROEN BAY WI	Town Uvillage GB	3/22/11	
Buttanton	-210101 Brookdate Ave Green Bay, W154313	Scity ASNWWVENOR	3/22/1	
8. Yeresa Smith	826 School Place A. B. Wis 5 130	Town G. B.	3-22-11	
sket ly buchateau	3452 Lunash North	Nown City Pulas Ki	3/22/11	
Smarlda Schuyle	STY Bond St.	O Town O Village City	3/22/11	
1, 5HGRRI EGRR	Certification of Circulato	r , certify	- /	
I reside at 224 BERKS	HILE DE COCA 1 ator's residence - include number, street, and municipality)	-132422		
I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdictic district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indi opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable un §.12.13(3)(a), Wis. Stats. (date) (signature of circulator)				
Page No. Page No. Programment Accountability Board, P.O. Box 7984, Madison, W1 53707-7984 Solution of this form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, W1 53707-7984 Solution of the information on this form is required by §§. 8.40 and 9.10, Wis. Stats. Page No. Page N				

TO: Government Accountability Board, State of Wisconsin (official with whom nomination papers or declaration of candidacy for the office is filed) We, the undersigned qualified electors of the 30th Senate District, State of Wisconsin (jurisdiction or district of officeholder) petition for the recall of State Senator Dave Hansen, 30th District from office pursuant (name of officeholder to be recalled and office) to Article XIII, Section 12 of the Wisconsin Constitution and S. 9.10 of the Wisconsin Statutes. STATEMENT OF REASON FOR RECALL (The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.) For serious, gross, neglect of duty and for failing to show up for work. THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED. SIGNATURES OF ELECTORS STREET & NUMBER OR RURAL ROUTE MUNICIPALITY OF RESIDENCE DATE OF SIGNING Rural address must also include box or fire no. Indicate Town, City, or Village Hilldale ovtown □ Village ☐ City □ Town ☐ Village El Cily ☐ Town ☐ City Ø Town Village ☐ City □ Town □ Village City □ Town □ Village City ☐ Town 7. □ Village □ City □ Томл 8. □ Village City City □ Town 9. Village City City □ Town 10. □ Village □ City Certification of Circulator RICHARD SALW. , certify: (name of circulator) (circulator's residence - include number, street, and municipality) I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under

EB-170 (Rev.7/2003, page no. box added 8/2005) The information on this form is required by Ss. 8.40 and 9.10, Wis. Stats. This form is prescribed by the State Elections Board, P.O. Box 2973, Madison, WI 53701-2973 608-266-8005, http://elections.state.wi.us

S. 12.13(3)(a), Wis. Ştats.

TO: WISCONSIN GOVERNM	IENT ACCOUNTABILITY (Ficial with whom nomination papers or declaration of candid	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the	30TH WISCONSIN STATE	SENATE DISTRICT or district of officeholder)	
petition for the recall of DAVE HANSE	N, 30TH DISTRICT STATE S	ENATE OF WI from	office pursuant
to Article XIII, Section 12 of the Wisconsin Co	(name of officeholder to be recalled and office) institution and 8 9 10 of the Wisconsin State	utes	
	STATEMENT OF REASON FOR RI		
(The reason for recall must be stated on petitions for	city, village, town, and school district officials.	The reason must be related to the official	responsibilities of
the officeholder. No statement of reason is required	to initiate the recall of state, congressional, leg	islative, judicial, or county officials.)	
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I	PURPOSES, WHEN DIFFERENT THAN MUN		UFFICIENT.
SIGNATURES OF ELECTORS	THE MUNICIPALITY OF RESIDENCE MUST STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
1.	3482 Sandyale Carteli.	☐ Town Village	4/5/11
J 9 (1212 Willes bon Dr	Ocity Howard	113/11
2. Jamela K. Luerr	Green Bry Wi 54313	a village Hours d	415/4
3. 8 0 0	2314 BRICK DR	□ Town	
3. Linda R. Bertola	GREEN BAY W I 54303	City HOWARD	4/5/11
4. So OGG -	2790 LAVENDER W	Town Village Howard	4-5-11
t the second	135/184 W 54313	☐ City	7 7 7
5. Allan May	135 (Kliminhi Kal	City Aguard	4-511
6 /	1078 REGUES WAY	□ Town □ Town	,
NORMAN NOPPE	GREED BAY WI 543/3	city HOW HRI	4-5-11
7. Stored Schweder	2847 OURHAM PUD	U Town U Village GREEN BM	4-5-11
2 14 14	GREEN BAY WI 54311	Town	9-5 (1
" Much Mand	G33 CLENDMIL Dr Green Bry WJ 543B	City /Lewish	4-5-11
9. 1.	300 CATHERING OR	□,Town ,	را سرمار
ba Much	GAEGN KAY W. 54313	City Haward	4371
M6. 0 Th	800 Catherine Dr	Drown Devillage Howard	4-5-11
1 VICK Druckrey	Green Bay WI 54313	in City	/ 0 / 1
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Certification of Circulato	r	
1, Richard A Mad	ame of circulator)	, certify	•
l reside at 10-65 S Arnes	s+La-Kewood Colora lator's residence - include number, street, and municipality)	92208 pp	 .
I personally circulated this recall petition and person		-	-
district represented by the officeholder named in this opposite his or her name. I know their respective resi			
§.12.13(3)(a), Wis. Stats.	Richard	A Madilla	
(date)		ignature of circulator)	

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.

This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY ficial with whom nomination papers or declaration of candid		
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE	SENATE DISTRICT or district of officeholder)	
petition for the recall of DAVE HANSE	•	· ·	office pursuant
to Article XIII, Section 12 of the Wisconsin Co	•	tutes.	
	TATEMENT OF REASON FOR RI		
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required		••	responsibilities of
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Tur squares at low years you want you	NINDOGRA MININDIANA	HOLD A LIZU OF BEGINDINGS. IS NOT S	UDDIOTENTS
<u> </u>	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		OFFICIENT,
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
	1157 packerland 13	1 O Town O Village C B Green BAV	3/21/
2	8B Pasen CL	Town Decity Cop Green Bay	731/
"I manage the		City HOWard	3/2/11
3. Mark	304 Raymond 5	Town Usullage	3/21/1
4. allow 2 has to	3745 Klee St.	Town Village Officity	3/22/11
5. Auch Kaut	827 Juss (+	Town Village Dy City	3/24/1
" Wound Hall	2847 Brockerwat	Town Willage Howard	3/22/11
7. Way Na Proprieto	2617 Indiastill:	Town Village South	3/22/11
8. Jean Haunes	3321 Windover	O Town Howard	3/22/1
5. Evic Rju	1428 Dousman St	Section G b	3/22/11
10. May an South	W9637 County RdC	Town O'Village Athelstone	3-22-11
54590 T 5 80 C	Certification of Circulate	or	<u> </u>
1, STUCKET CERC	me of circulator)	, certify	:
reside at <u>JZH BERKE</u>	SHIRE DR COCOA FL lator's residence - include number, street, and municipality)	32922	<u> </u>
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective resi	petition. I know that each person signed the p	paper with full knowledge of its content of	n the date indicated

GAB-170 (Rev. 6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats. This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8005, http://gab.wi.gov email: gab@wi.gov

§.12.13(3)(a), Wis. Stats.

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY		
	ficial with whom nomination papers or declaration of candid		
We, the undersigned qualified electors of the	30'" WISCONSIN STATE (jurisdiction of	SENATE DISTRI or district of officeholder)	<u>CT</u>
petition for the recall of <u>DAVE HANSE</u>	N 30TH DISTRICT STATE S (name of officeholder to be recalled and office)	ENATE OF WI	from office pursuant
to Article XIII, Section 12 of the Wisconsin Co	nstitution and §.9.10 of the Wisconsin Stat	utes.	
s	TATEMENT OF REASON FOR RI	ECALL	
(The reason for recall must be stated on petitions for			
the officeholder. No statement of reason is required	to initiate the recall of state, congressional, leg	islative, judicial, or county offic	vials.)
			
THE MUNICIPALITY USED FOR MAILING	PURPOSES, WHEN DIFFERENT THAN MUN	CICIPALITY OF RESIDENCE, 1	S NOT SUFFICIENT.
U	THE MUNICIPALITY OF RESIDENCE MUST		
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDE	ENCE DATE OF
	Rural address must also include box or fire no.	Indicate Town, City, or Villa	age SIGNING
1. Scet aberton	2993 Wadale AVQ	□ Town □ City H ○ W √ √ 0	7-5-11
2. () () () ()	860 Atlantis Ct	□ Town □ Town □ City	4-5-11
3. Mail del 1.	3176 Molly Brown Lh.	O Town Va Village	4-5-11
- valy exercites	201 (shere 121.	City 1100019	
1 pwell De Great	Joseph Dogil	City HOLU a.C!	1 4-5-11
5. Jandu Mronwotz	85/ attento G	Town Willage AWALL City	4-5-11
6. Ach Inte	2954 WHATLEKET	Town City Town City	4-5-11
7. 0 0 1 0 0 1	2506	C) Town	1
Kuph E Hausen	SHADE Tree LN GAB	City HONARCI	1 4-05-11
8. 94 2	1709 Velp ave #15	Town No Village HOW ard	4-5-11
2.1	1161 Velsen Rol	□ Town	
Wendy Delvoye	Green Bay WI 54313	City Howard	4-5-11
10. Juniter Grecke	Green Bour NI 5431	TOWN HOWARD	4-5-//
(b) (b)	Certification of Circulate	<u>, </u>	
I, Richard A Mod	ane of circulator)		, certify:
•	ane of circulator) 5 5 1 CKe wood Colora, lator's residence - include number, street, and municipality)	10 8022G	
(circu	uator's residence - include number, street, and municipality)		
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective resi	petition. I know that each person signed the p	aper with full knowledge of its	content on the date indicated
§.12.13(3)(a), Wis. Stats.	Krihare	1 A 1M . 1-	1/100
<u>4-5-//</u>		ignature of circulator)	<u> </u>
GAB-170 (Rev.6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, P. 608-266-8005, http://gab.wi.gov_ernail: gab@wi.gov			Page No. 1915

	RECALLIETTION	_	
TO: WISCONSIN GOVERNM	NENT ACCOUNTABILITY ACCOUNTABILITY ACCOUNTABILITY	BOARD acy for the office is filed)	·
We, the undersigned qualified electors of the	30TH WISCONSIN STATE	SENATE DISTRICT or district of officeholder)	
petition for the recall of <u>DAVE</u> HANSE	(name of officeholder to be recalled and office)	ENATE OF WI from	n office pursuant
to Article XIII, Section 12 of the Wisconsin Co	,	utes.	
	STATEMENT OF REASON FOR RI		
The reason for recall must be stated on petitions for	city, village, town, and school district officials.	The reason must be related to the official interesting indicials to recomm officials.	l responsibilities of
the officeholder. No statement of reason is required	i to initiale the recall of state, congressional, leg		·
	<u> </u>		
	G PURPOSES, WHEN DIFFERENT THAN MUN F THE MUNICIPALITY OF RESIDENCE MUST		SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
	Rural address must also include box or fire no.	Indicate Town, City, or Village Town 54301	SIGNING
1 PATrick m PryAL	16/27 Sickland AVE	□ Village C	3-17-11
	BP18 GreenBray WI 5+00-1838 VAD OSS CT	□ Town	,,,
2. JOHN J JENDE	GREE	SPCity SIST	3-20-11
3. Janet Hansen	1023 Nichlet Ave.	Town Uvillage Over N Over C	3-20-11
Janet Hansen	Green Bay, WI.	□ Town	21011
4. Dennis Kellwi	Green Bay	Sycity Green (41)	3-20-11
5. Can Robert	Green Bay	O Town O Village Ocity O PPABAY	3-20-11
6. (1)	519 N Norwood	Ci Town	
~m		Dillage Green Bay	3-20-11
7.		☐ Town ☐ Village	
		☐ City	
8.		☐ Village ☐ City	
9.		□ Town □ Village	
	<u> </u>	□ City	<u> </u>
10.		☐ Town ☐ Village ☐ City	
	Certification of Circulat	or	
, Mark Vigil		, cert	ify:
Treside at 4620 W. Cedar	(name of circulator)	do _ 80219_	
(cir	culator's residence - include number, street, and municipality	·	
I personally circulated this recall petition and personal	onally obtained each of the signatures on this pa	per. I know that the signers are elector	rs of the jurisdiction of
district represented by the officeholder named in the opposite his or her name. I know their respective respec	as petition. I know that each person signed the sidences given. I support this recall petition. I a	paper with tull knowledge of its conter m aware that falsifying this certification	n on me uate muicated i is punishable under
§.12.13(3)(a), Wis. Stats.			
3-24-11 (date)	MUNY	(signature of circulator)	
(wait)		· 	

GAB-170 (Rev.6/2007) The information on this form is required by §§ 8.40 and 9.10, Wis Stats.

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608-266-8005, http://eab.wi.gov email: gab@wi.gov

Page No.)914

6

	EIVT ACCOUNTABILITY ficial with whom nomination papers or declaration of candid		
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE	SENATE DISTRICT or district of officeholder)	,
petition for the recall of DAVE HANSE	(name of officeholder to be recalled and office)	ENATE OF WI from	office pursuant
to Article XIII, Section 12 of the Wisconsin Con	-		
S' (The reason for recall must be stated on petitions for the officeholder. No statement of reason is required.)		The reason must be related to the official :	responsibilities of
			
	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		UFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF SIGNING
1	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
"latinu	GreenBay W1 54313	Gity Howard	4/5/11
The Trees M.	Green Roy WI54313	Town Willage Howard	11/2/H
3/4/	2857 HillerestCt	Town	4/5/11
	962 Stockbury Ct	a City Moward	(1711
Jenny Liga	Green Bay, wt 54313	ocity Howard	4-5-11
5. Rie hard Alberta	Green Boy W. 54313.	D Town In T	4-5-11
6. Wich Milley	916 Southern (105-16) Green Buy Wi S/303	D Town D Village City	4/5/11
1. Role FM. BU to	14301 M. 1150 M	D Town Village City	4-5-11
8. Carry wonds	3487 Sondgar (CI)+e	O Town Prillage O City AWALU	4-5-11
9. Shawn Juleson	1267 Millie CK GB 54313	□ Town □ Village • • • • • • • • • • • • • • • • • •	4-5-11
19 200	3577 ABBEY CT GB 593/3	D Town Styllage / Toward City / Toward	9-5-11
7 1 1 0 00 1	Certification of Circulate		
•	nne of circulator)	, certify	
I reside at 1065 S. Ame	5 34 La/Cewaad Collator's residence - include number, street, and municipality)	orado 80226	<u>'</u>
1 personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective resi §.12.13(3)(a), Wis. Stats.	petition. I know that each person signed the person dences given. I support this recall petition. I are	paper with full knowledge of its content of	on the date indicated punishable under
4-5-11 (date)	_ Kichard !	A Machini A Market Mark	

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats. This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8005, http://pab.wi.gov email: gab@wi.gov

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY icial with whom nomination papers or declaration of candida		
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE (jurisdiction o	SENATE DISTRICT rdistrict of officeholder)	
petition for the recall of <u>DAVE HANSE</u>	(name of officeholder to be recalled and office)	ENATE OF WI from	office pursuant
to Article XIII, Section 12 of the Wisconsin Con	nstitution and §.9.10 of the Wisconsin Statu	ites.	
S' (The reason for recall must be stated on petitions for of the officeholder. No statement of reason is required to		he reason must be related to the official i	responsibilities of
31	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST	•	UFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
Mann for Zaddas	5/7.5 tist	Village Green Bay	3/21/11
24/Mln	1653 ST 49mcs	Town & BRY O City	3/21/11
3.	ucc	D Town D Village QxCity	ادو
4. Day Kolos	Po 2686 water 20	Town Ovillage G. B,	3/21/11
5. Clair Matt 10.	WIII 47 Hall west	O Town O Village Athel 5 1 & h C 200 City	J-11-//
6. Mary Mothers	W841APero folds	Drown Vausankee	3/2//11
7. JERNIN Varior	14th Thersitus	Town Village Gree Bar.	7.7
8. Dimos Starks	1.383 Thomasst.	Town Village Cran bay	3/21/11
9. Alton STO Ittorio	1750 wedgewood	B Town D Village PCity GVEEN BOM	3-21-11
10. Yuke	1750 Wedge woodor	Town O'llage O'city Construction Construct	3-21-11
, Mark Vigil	Certification of Circulato		<u> </u>
I reside at 4620 W. Ceda	me of circulator) OVE DENVEY ator's residence - include number, street, and municipality)	- Colorado 8	0219
I personally circulated this recall petition and personal district represented by the officeholder named in this opposite his or her name. I know their respective resides 12.13(3)(a), Wis. Stats.	ally obtained each of the signatures on this pap petition. I know that each person signed the p dences given. I support this recall petition. I an	aper with full knowledge of its content of	on the date indicated
GAB-170 (Rev.6/2007) The information on this form is required by	§§. 8.40 and 9.10, Wis. Stats.	Page No.	1/11/41

GAB-170 (Rev. 6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.

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TO: WISCONSIN GOVERNM	IENT ACCOUNTABILITY fficial with whom nomination papers or declaration of candid		
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE	SENATE DISTRICT or district of officeholder)	,
petition for the recall of DAVE HANSE	N 30TH DISTRICT STATE S (name of officeholder to be recalled and office)	ENATE OF WI from	n office pursuant
to Article XIII, Section 12 of the Wisconsin Co	onstitution and §.9.10 of the Wisconsin Stat	utes.	
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required		The reason must be related to the officia	ıl responsibilities of
	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	CB WT 54311	□ Town □ Village □ City □ No. (1)	5/27/11
2. W/b///	1759 BUNGE- 611/14	O Town O Village OXCity O	3/27/11
3. 2. 3. C. L	Brasses WI	O Village Brussils	3.2741
4. If the fac	387 W Musch	O Town O Village Occity Occity Occity	3-27-11
5 Unn Jacoper	3201 /fumbrat	O Town O Village OCity O	327.11
6.107		O Town O Village O City	1
Michael & Dutoveki	223 Se Buchanans	U Town Drugh Buy	3-27-11
8. Show De Long	Soc Collen Ct Green Bay, W. S4313	D Town Village + Cward D City	3/21/11
9. Janeon Jins	Loo gueis	D Town D Village D City LOO FEBERS	3/27/11
10.	77	U Town	
Mack Visil	Certification of Circulate	or , centil	Su:
I reside at 4620 W. Codo	ame of circulator) We. Dem Vert lator's residence - include number, street, and municipality)	Δ /	0219.
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective resi §.12.13(3)(a), Wis. Stats.	petition. I know that each person signed the p dences given. I support this recall petition. I an	aper with full knowledge of its content	on the date indicated
5- /- // (date)		Ignature of circulator)	
GAB-170 (Rev. 6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, P 608-266-8005, http://gab.wi.gov_email: gab@wi.gov		Page N	0. 919

6

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY ficial with whom nomination papers or declaration of candid:	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE	SENATE DISTRICT r district of officeholder)	,
petition for the recall of <u>DAVE HANSE</u>	N 30TH DISTRICT STATE S	ENATE OF WI from	office pursuant
to Article XIII, Section 12 of the Wisconsin Co.	·	utes.	
S (The reason for recall must be stated on petitions for	TATEMENT OF REASON FOR RE		resnonsibilities of
the officeholder. No statement of reason is required	to initiate the recall of state, congressional, leg	islative, judicial, or county officials.)	responsionines of
THE MINICIPALITY USED FOR MAILING	PURPOSES, WHEN DIFFERENT THAN MUN	HCIPALITY OF RESIDENCE, IS NOT S	UFFICIENT.
	THE MUNICIPALITY OF RESIDENCE MUST		
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. CALLER CALALÍN	852 Pinecrest	Town Howard	4511
1. Susan Schnitch	119 11 2 11	City	4-5-11
2. Mat Van Sagan	1136 Hern Bay Wy	Do Town DoVillage fow AiV	4-5-11
3.	ggy Harry bod 5t	□ Town	4.5-4
Dance	210-1	Town	1) 4
4. milator	2785 Lavender La	Stringe Howard	4/5/11
5. M m. (D)	3112 Krights Lane	☐ Town ὰ-Village	4/1-111
Halley 10015	3063 Devioy Land	Town	7/2//
6 / Q / W	JOD SEVIOS LANC	D Village Howard	7/5/1)
7. Janu Skry	883 RICHBOROUGH RO	D Town SKVillage Haward	4-5-11
8. Hard le Venbat C	20148 NIKKI LER COUPT	Town Willage Willage	4-5-11
9. Philler	11/3 Rockwell Rd	Styllage Howard	4/5/11
10. Sue Leatmeestin	3853 Shawarno Ave	Town Hourn	4/5/11
	Certification of Circulate		
I, Kichard HYV	ame of circulator)	, certify	
1 leside at	Mes 57 LGKewood Ilator's residence - include number, street, and municipality)	Colorado 8022	<u>C</u> .
I personally circulated this recall petition and person district represented by the officeholder named in this	s petition. I know that each person signed the p	paper with full knowledge of its content of	on the date indicated
opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.	idences given. I support this recall petition. I ar	m aware that falsifying this certification is	s punishable under
4-5-11	Kichard	A Madull	TT
(date)		signature of circulator)	

GAB-170 (Rev.6/2007) The information on this form is required by §§ 8.40 and 9.10, Wis. Stats.

This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8005, http://gab.wi.gov email: gab@wi.gov

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY icial with whom nomination papers or declaration of candida	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE	SENATE DISTRICT r district of officeholder)	······································
petition for the recall of DAVE HANSE	•	,	office pursuant
to Article XIII, Section 12 of the Wisconsin Con	(name of officeholder to be recalled and office)	utes	
,	TATEMENT OF REASON FOR RE		
(The reason for recall must be stated on petitions for a the officeholder. No statement of reason is required to	city, village, town, and school district officials. I	The reason must be related to the official	responsibilities of
the officentiaer. Two statement of reason is required to	o minute the recail of state, congressional, regi	isinive, juaciui, or courty officinis,	
,,	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		UFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING 3-29-11
1) harts Klaria	45 2 N St BICHUR	□ Village □ City	WHPS
2.	mann	© Town	2 327611
MANT	124 Elm St Carlined	Ochy Meul Bay	37781
3. Menssy renaemann	1621, 3314 Devolum Court	D.Village Cicee 3	3/30/11
4. \(\)	3964 Thompson Cr	⊺Ø Town	2/2011
harry schools	2.7	dicity (1700111)	7/2011
5. Som man	34, 2 situlies us	U Village (7,)	3/30/11
6. Mil Delayette	3316 Walter Way	D Town City Creen Control City Creen Control Contr	3/36/11
7 Con Lary	1659 longwood the	D Town U Village CT (LL M Day	3/30/11
8. Anich That	eny Londi Dr.	□ Town	3/36/11
9. Mr. P. O. 111110	330 oregon St	Drown Strike Oreen Buy	3 30 11
10.		M ITOWN	12 120 111
"Luty Rolli	3558 Blackbirry Lane	Tolkity GVE PIBCY	3/30/11
, Most Vigil	Certification of Circulate	or , certif	<i>r</i> :
1, 4620 (na	me of circulator)	Colorado 802	218
reside at 10 - 40 (circul	lator's residence - include number, street, and municipality)	CATOTORICO DOS	
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective resis §.12.13(3)(a), Wis. Stats.	petition. I know that each person signed the p	paper with full knowledge of its content	on the date indicated
230-11	Markt		
(date) GAB-170 (Rev.6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, P. 608-266-8005, http://gab.wi.gov_email: gab@wi.gov	§§. 8.40 and 9.10, Wis. Stats.	signature of circulator) Page No	1921

10: WISCONSIN GOVERNING	fficial with whom nomination papers or declaration of candid	10011 K. 12 acy for the office is filed)	
We, the undersigned qualified electors of the		SENATE DISTRICT or district of officeholder)	,
petition for the recall of <u>DAVE HANSE</u>	·		n office pursuant
to Article XIII, Section 12 of the Wisconsin Co	onstitution and §.9.10 of the Wisconsin State	utes.	
·	STATEMENT OF REASON FOR RI	ECALL	
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required			l responsibilities of
·····			
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	F PURPOSES, WHEN DIFFERENT THAN MUN		SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OF RESIDENCE MUST	MUNICIPALITY OF RESIDENCE	DATE OF
SIGNATURES OF ELECTORS	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
Bynn Saught	3139 mally Breets	D Town On Village Haward	4-5-11
2. Junes of July	127 Vangelack (Very Breen Ber, W. 54312)	Drown Styllage City / Ward	4-5-11
3 Kachy M allister	Green Ban WI 54313	o Town Set Village O City HOWARD	4-5-11
4 Crus Sopre	2966 MUNICIES CT CREEN 3AT, WI 45313	Town Willage Lower	4711
5. Jim & allen	Crown BAY WS 54313	DVIllage HUWANI)	4-5-11
6. John P. Johnneson	3607 GLOW KENT CT. GREEN BAY, WI 54313	D Town SCYMage HOWARD	4/5/11
1 1 Deens	3194 Liberty Bell RD B WI 54313	D Town D Town D City Howard	4/5/11
8. Dancer Cam Jums	22-90 Constellation	D Town St Village D City	4/5/11
9. Lets Cousin	931, Ve/se_) Rd	D Town CAVillage D City AC WAR	4/5/11
10. Roy Througe	2800 Inon 81	D Town P Village of overd	4/5/1
	Certification of Circulate		
1, Richard A M	Madrill III	, certif	fy:
I reside at 1065 S. Aw	ame of circulator) Les	colorado 802	.てく
I personally circulated this recall petition and person district represented by the officeholder named in this			
opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.			
8.12.13(3)(a), WIS. 318(S. 4-5-11	Tichard	A Malilo	FV
(date)	(s	ignature of circulator)	

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.

This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. AR

TO: WISCONSIN GOVERNO	MENT ACCOUNTABILITY Official with whom nomination papers or declaration of candi	BOARD	
We, the undersigned qualified electors of the	30TH WISCONSIN STATE		
petition for the recall of DAVE HANS	EN , 30TH DISTRICT STATE S	,	office pursuant
to Article XIII, Section 12 of the Wisconsin C	(name of officeholder to be recalled and office)		•
	STATEMENT OF REASON FOR R	ECALL	
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reside at 8408 ENGLER (1)	and ficinculator) St John M	6 63114	_
//	ulator's residence - include number, street, and municipality)		
personally circulated this recall position and person district represented by the officeholder named in this apposite his or her name. I know their respective res	s petition. I know that each person signed the p	aper with full knowledge of its content or	the date indicated
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(AB-170 (Rev.6/2007) The information on this form is required by his form is prescribed by the Government Accountability Board, F 08-266-8005, http://gab.wi.gov.email: gab@wi.gov	v §§, 8.40 and 9.10, Wis, Stats.	granie of circulator) Page No.	1923

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TO: WISCONSIN GOVERNM	IENT ACCOUNTABILITY fficial with whom nomination papers or declaration of candid.	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE		
petition for the recall of <u>DAVE HANSE</u>	Опиганской с		office pursuant
to Article XIII, Section 12 of the Wisconsin Co	(name of officeholder to be recalled and office)		
·	STATEMENT OF REASON FOR RI		
The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	city, village, town, and school district officials.	The reason must be related to the official	responsibilities of
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2.	Green Bay, 54304 54304	D Town	3/24/
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1 pera	1665 Birch St	O Village	3/20/11
5. Tarm Three To June 1.	+131 S. Asnimy	Town	7/20/11
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MAD BCOV	name of circulator)	OCOA FL 3	29 2A
reside at Circ	culator's residence - include number, street, and municipality)		<u> </u>
personally circulated this recall petition and person district represented by the officeholder named in the opposite his or her name. I know their respective re	is petition. I know that each person signed the	paper with full knowledge of its content	on the date indicate
§.12.13(3)(a) Wis. Stats.	Show	F. G. J.) 20 r co
(date)		(signature of circulator)	
GAB-170 (Rev.6/2007) The information on this form is required This form is prescribed by the Government Accountability Board, 608-266-2005, http://cab.wi.cov.email.gab@wi.cov.	by §§. 8.40 and 9.10, Wis. Stats. P.O. Box 7984, Madison, WI 53707-7984	Page N	· Mor

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY icial with whom nomination papers or declaration of candida	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the	30 TH WISCONSIN_STATE		
petition for the recall of <u>DAVE HANSE</u>	9		office pursuant
to Article XIII, Section 12 of the Wisconsin Co.	nstitution and §.9.10 of the Wisconsin Statu	utes.	
S	TATEMENT OF REASON FOR RE	ECALL	
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	city, village, town, and school district officials. I to initiate the recall of state, congressional, leg	the reason must be related to the official islative, judicial, or county officials.)	responsionnies oj
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3/100/2	Wells Hota Park price	Town Town To 75%	3/24/11
hair the	1749 E MANON ST	4 City 10 17 0 FT	- 1
4. Annie wunis	1749 E Mason St 6B, W 54302	Willage (Ween Bang British	3/24/11
5. ANILVALOR	GREENSON TUROU	Town Drillage Shan Bey	324/4
6	832 Pilorina way	Town Green Land	3/24/11
Vineetha	Green Day 14304	City C	
1. Lindspylvells	Green Bay W154301	Village City	3/24/11
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I reside at 2 24 BERKS	name of circulator)	+ FL 3292	<u> </u>
	ulator's residence - include number, street, and municipality)		
I personally circulated this recall petition and perso district represented by the officeholder named in this opposite his or her name. I know their respective res	s petition. I know that each person signed the	paper with full knowledge of its content	on the date malcated
§.12.13(3)(a), Wis. Stats.	~A () 1	C - E.	M. da
O Q I II	<u> </u>	(signature of circulator)	
GAB-170 (Rev.6/2007) The information on this form is required This form is prescribed by the Government Accountability Board, 608-266-8005, http://gab.wi.gov email: gab@wi.gov	by §§. 8.40 and 9.10, Wis. Stats. P.O. Box 7984, Madison, WI 53707-7984	Page N	» 1/12S

	RECALL FEITHON		
10: <u>Wisconsin Govern</u>	VMENT ACCOUNTABILITY (official with whom nomination papers or declaration of candid-	BOARD	.
	• •	_	
We, the undersigned qualified electors of the	ne 301H WISCONSIN STATE	SENATE DISTRICT r district of officeholder)	
petition for the recall of DAVE HAN	VSEN , 30 TH DISTRICT STATE S	*	n office pursuant
o Article XIII. Section 12 of the Wisconsi	n Constitution and §.9.10 of the Wisconsin State	utes.	
OTHER THE SECTION 12 OF THE TRIBUTE	STATEMENT OF REASON FOR RE		
The reason for recall must be stated on petition the officeholder. No statement of reason is requ	is for city, village, town, and school district officials. It uired to initiate the recall of state, congressional, leg	The reason must be related to the officia	l responsibilities of
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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
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4. Mills	1492 WISTANAVE 331	Town	1////
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10.		☐ Town ☐ Village	
. Richard A Made	Certification of Circulato	or, certi	fy:
reside at 1065 S. Amcs 5	Lakewood Worado	80226	
	(circulator's residence - include number, street, and municipality)		
district represented by the officeholder named i opposite his or her name. I know their respective	personally obtained each of the signatures on this pain this petition. I know that each person signed the person signed the person signed the person signed. I support this recall petition. I are	paper with full knowledge of its content an aware that falsifying this certification	t on the date indicated is punishable under
§.12.13(3)(a), Wis. Stats.		rel AMade	TENT .
4-19-11	Kicha	rd Illiaan	ν
(date)	(4	signature of circulator)	

GAB-170 (Rev. 6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats. This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8005, http://gob.wi.gov email: gab@wi.gov

Page No. 192U

TO: WISCONSIN GOVERNM	IENT ACCOUNTABILITY fficial with whom nomination papers or declaration of candid	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the	• •	•	
	(jurisdiction o	r district of officeholder)	
petition for the recall of DAVE HANSE	(name of officeholder to be recalled and office)	ENATE OF WI from	office pursuant
to Article XIII, Section 12 of the Wisconsin Co	,	utes.	
·	STATEMENT OF REASON FOR RI		
(The reason for recall must be stated on petitions for	city, village, town, and school district officials.	The reason must be related to the official	responsibilities of
the officeholder. No statement of reason is required	to initiate the recall of state, congressional, leg	islative, judicial, or county officials.)	
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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
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2 AMMINISTER	# 8	O'Village CA VEEN DR	7-11-00
3. 0 (1)	1670 WesternAL	O Village	7
David C Willes	#13	To Village OREEN BAY	4-19-11
Doe Olesniczak	1670 #19 WEFER	Crycity	4-19-11
5. 1 w2 Torres	1670 yrester Ave #18 Grzen	Town Urillage State Stat	4-19-11
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7. Outston 11) unin haid	1270 Strat	□ Town □ Yillage	4/19/11
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Daid Loonard S.	512 S. Ashland AVE. Greenbay wf 54303	O Village CAS	4-19-11
9/1/1/	4045 Hollcrest	De Town D Village	1 100 11
Ch LOTTON JU	Oxido W, 541/5	Ocity UNEIRa	4-17-11
1º Chandia Ditshe	#10	O Town ChB Village Chambre Cha	Ra 4-19
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1, Kichard AMC	drille	, certif	y:
I reside at 106 5 S. Ame	ame of circulator) 5	orado 8022	<i>چ</i>
(circu	plator's residence - include number, street, and municipality)		
I personally circulated this recall petition and person			
district represented by the officeholder named in this opposite his or her name. I know their respective resi			
§.12.13(3)(a), Wis. Stats.		, 1111	N DET
4-19-1	1 Keeling	ed HV ad	w_
(date)	(s	ignature of circulator)	

GAB-170 (Rev. 6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.

This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://gab.wi.gov email: gab@wi.gov

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY icial with whom nomination papers or declaration of candida		
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE (jurisdiction o	SENATE DISTRICT r district of officeholder)	,
petition for the recall of DAVE HANSE	(name of officeholder to be recalled and office)	ENATE OF WI from	office pursuant
to Article XIII, Section 12 of the Wisconsin Con	nstitution and §.9.10 of the Wisconsin State	utes.	
S	TATEMENT OF REASON FOR RE	ECALL	
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	city, village, town, and school district officials. I	The reason must be related to the official i	esponsibilities of
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1.	1772 Western Que #24	□ Town	
andrawiedes	Green Bay WI 54303	D Town	4119/11
2. Sandra T. Voyel	1772 Water Quet 23	O City Sheen Buy	4/19/11
3. John Olempancoch	Let 1772 Western Are 15	O Village CWN DICHMEN	WALL
4. John Com	1772 Westentis	□ Town □ Village	4-19-11
5. libert Vans	1777 WESTERN AVE	Town	7 1 1
790	ATTA 16	D Town	4-19-11
6. Apol Yourg	1772 Western aleto	U Village GB	4/19-11
7.	1794 Western Ave#6	Town Urllage GB	4/19/11
8.	1794 Wester AVC#6	Town	4.14.11
		☐ Town	
9.	1794 western Ave #6	Village Village	915/4
10. Achley School	1794 Western Ave #19	Town Urillage ACity	4/19/11
	Certification of Circulate	or	
I, Richard A M	and Circulator)	, certify	:
Treside at 1000 3 Miles	St Lakewood - Colora, later's residence - include number, street, and municipality)	do 80226	
I personally circulated this recall petition and person	ally obtained each of the signatures on this par	per. I know that the signers are electors of	of the jurisdiction or
district represented by the officeholder named in this	petition. I know that each person signed the p	paper with full knowledge of its content of	on the date indicated
opposite his or her name. I know their respective resi §.12.13(3)(a), Wis. Stats.		1) - 11 1	_
4-K-11	Richa	nd HWach	W
(date)		signature of circulator)	

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis Stats.

This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8005, http://eab.wi.gov email: gab@wi.gov

TO: WISCONSIN GOVERNMENT ACCOUNTABILITY BOARD (office all with whom nomination papers or declaration of candidacy for the office is filed)

608-266-8005, http://gnb.wi.gov email: gab@wi.gov

We, the undersigned qualified electors of the	(jurisdiction o	SENATE DISTRICT or district of officeholder)	
etition for the recall of DAVE HAN	SEN , 30 TH DISTRICT STATE S	ENATE OF WI from	office pursuant
Article XIII, Section 12 of the Wisconsin	Constitution and §.9.10 of the Wisconsin Stat	utes.	
•	STATEMENT OF REASON FOR RI		
	for city, village, town, and school district officials.	The reason must be related to the officia	l responsibilities of
officeholder. No statement of reason is requi	ired to initiate the recall of state, congressional, leg	rislative, judicial, or county officials.)	
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THE MUNICIPALITY USED FOR MAIL	ING PURPOSES, WHEN DIFFERENT THAN MUN	NICIPALITY OF RESIDENCE, IS NOT	SUFFICIENT.
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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
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000 401111111100000	#.U	D Town	
Rew Mickelson	1 1686 DEMISHIEN AVE	Divillage Scen Bay	4-19-11
3. 11	6275 BAIRD 51	□ Town	
Kenny & Possil		Desity Thurs BAY	479-11
1. A-A-	1772 WESTERN AVE 1217	O Town	11 10 12
Joseph	` <u> </u>	SVIIIage SVCity	9-19-11
	1772 Wastern Ave 12	O Town Green Ray w.	- 54703
Cother P Water	jis .	St City	9-19-11
· North les	177 Western Aus	Town	4/19/11
N Co	1222 2 1/4/14 500 644	D Town 1	
nlicancia Sexton	1772 Western Ave	O Village LIVOON Prin	4-19-2011
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D. Illetaren	17 /2 WIDSTEON FILLS	Qcity Green Bay	14-17-11
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John Thin	11.000000000000000000000000000000000000	City 6 New Bay	4-19-11
0 0 0 1	1777 Western Auc	F) Town	4-19-11
Seroy March	AP+ 10	Strillage Careen Bay	4-170.1
Richard BAM			<u> </u>
Bulland 1	Certification of Circulate)	٠.
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3100 at 7 - 2 0 1 1 1	eirculator's residence - include number, street, and municipality)	d-colorado 8	0226.
	rsonally obtained each of the signatures on this paths this petition. I know that each person signed the particular that each person signed that each per		
posite his or her name. I know their respective	residences given. I support this recall petition. I ar		
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(date)	a rela	signature of circulator)	Cadril
B-170 (Rev.6/2007) The information on this form is requi-	red by §§. 8.40 and 9.10, Wis. Stats.	Page No	$\alpha \alpha$
s form is prescribed by the Government Accountability Box -266-8005, http://gnb.wi.gov_email: gab@wi.gov	ard, P.O. Box 7984, Madison, WI 53707-7984	1 age 1 w	1/0/

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY ficial with whom nomination papers or declaration of candid	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the _	30 TH WISCONSIN STATE	SENATE DISTRICT or district of officeholder)	
petition for the recall of DAVE HANSE	N, 30TH DISTRICT STATE S		office pursuant
to Article XIII, Section 12 of the Wisconsin Co	(name of officeholder to be recalled and office) institution and §.9.10 of the Wisconsin Stat	utes.	
	TATEMENT OF REASON FOR RI		laan amikilii aa af
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	city, village, town, and school district officials. A to initiate the recall of state, congressional, leg	ine reason must be retated to the officials.) rislative, judicial, or county officials.)	responsiounies oj
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2. 1/ 1 m22	4433 Multun Road	D Town	4/5/201
3. h , Q	Giron By WI 91313 3137 Molly Brown &	City / YVVCYC"	1/)(2-1)
Muke Faurent	Green Bay WI 543	30 City Howard	4/5/2011
4. Charture VI Was	PO. BOX 11944	P Village HOW9120	4/5/0011
Sam De la	3350 WINDOVER	Town Original Hanner	4/5/11
6.11 5 7	BREEN BAY WI54313 3045 Glendale Ave	□ Town	11/5/11
10/m) /4	Green Bay, WI 543/3	City MOWATCA	9/3/1
1. Price Can B	brensay Budge	De City Hand	4-57/
8. And Short	813 May De 101.	Town De Village City	4-5-11
91) 8/ 1	31914 Wherty bell Kel	☐ Town Styllage	4-5-11
16. 1) 1	1707 Velp Ave Apt C	☐ Town	1 - 1
Cory Johnsten	Green Bay 41	Di Village Howard	7-3-11
- 7 L L 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Certification of Circulate		
(n	lade later	, certif	•
I reside at 1065 S, Am	residence - include number, street, and municipality)	olorado 8022	<u>C</u>
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.	s petition. I know that each person signed the p	paper with full knowledge of its content	on the date indicate
4-5-11	Richard	A Madrill	
(date) GAB-170 (Rev.6/2007) The information on this form is required b This form is prescribed by the Government Accountability Board, I 608-266-8005, http://gab.wi.gov email: gab@wi gov	y §§. 8.40 and 9.10, Wis. Stats.	ignature of circulator) Page N	. 1930

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY ficial with whom nomination papers or declaration of candid	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE	SENATE DISTRICT or district of officeholder)	,
petition for the recall of DAVE HANSE	(name of officeholder to be recalled and office)	ENATE OF WI from	n office pursuant
to Article XIII, Section 12 of the Wisconsin Co	·	utes.	
S (The reason for recall must be stated on petitions for	TATEMENT OF REASON FOR RI		d reenonsibilities of
the officeholder. No statement of reason is required			i responsionities of
THE MUNICIPALITY USED FOR MAILING	PURPOSES, WHEN DIFFERENT THAN MUN	ICIPALITY OF RESIDENCE, IS NOT	SUFFICIENT.
II	THE MUNICIPALITY OF RESIDENCE MUST		
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2. 2. // h ().		□ Town	3.31-11
anthrough Svandre	637 Lime Kiln	LO City (VECAUSKY	12.21 11
3. Harris State of the state of	KHAN N	□ Village □ City	-
4. 1	646 10 1	□ Town □ Village □ City □ City	3-31-(1
5.	PILL BAINTEN	□ Town □ Village	-2.
Maria 6	Dailer 33%	Ap City 6 , 13	15 71:11
6 Ryan Lempy	2730 Kumbalat Ka	D'Village D'City 5	3-3/-//
7. term Es	1613 Kily 7971	D Town D Village Stity	3-31-11
8 Killy King	1633 Franz Ava	Town Uvillage	3-31-11
9. Advice H. P7179	Bas E. wrindt st	Town Uvillage TCity) - 3/-1/
10.	11776 01 1 1 1 1 1	Town	2 2/1/
105e RODI Herriro	1157 IKW WAV	Acity G.	P 3 ~ [/]
I, Mark Visil	Certification of Circulate	or , certii	y:
Treside at 4620 W. Ce of	gre of circulator) OC. and Donver Collator's residence - include number, street, and municipality)	lorado 802	<i>19</i>
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective residuals and the second of the secon	petition. I know that each person signed the p	aper with full knowledge of its content	on the date indicated
§.12.13(3)(a), Wis. Stats.	Mock	>	
(date) GAB-170 (Rev.6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, P. 608-266-8005, http://gab.wi.gov email: gab@wi.gov	§§. 8.40 and 9.10, Wis. Stats.	ignature of circulator) Page N	. 1931

TO: WISCONSIN GOVERNM	EINT ACCOUNTABILITY ficial with whom nomination papers or declaration of candid.	BOARD	
We, the undersigned qualified electors of the			
	(jurisdiction o	r district of officeholder)	
petition for the recall of <u>DAVE HANSE</u>	(name of officeholder to be recalled and office)	ENATE OF WIfrom	office pursuant
to Article XIII, Section 12 of the Wisconsin Co	nstitution and §.9.10 of the Wisconsin State	utes.	
	TATEMENT OF REASON FOR RE		
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	city, village, lown, and school district officials. I to initiate the recall of state, congressional, leg	ine reason musi ve reiaiea io ine ojjiciai islative, judicial, or county officials.)	responsibilities oj
			
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H	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		UFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF SIGNING
(2) 1 (2)	Rural address must also include box or fire no.	Indicate Town, City, or Village	1 ,
1. But Sohmat		o Village Cavern By Section	3/30/4
2. Frances	241 Nicolett Die	D Town D Village COVEC/1 B2//	3/30/4
3. // 19 4	7 1 1	□ Town	71
-Alexander Maria		D City	
4. Krun & Most	835 Christianas	Drown Urillage G, B,	3.31-11
5. Michael (15) ont	423 Webster	O Town G C C C C C C C C C C C C C C C C C C	3-31-11
6. Patrick. norms	223 S. Jackson st.	Drown Dvillage Aray Bay	3-71-11
1. () thomas Great		Town O Village O P C 14	331-11
8.	2200 Mantowac ed	Town	
Michigan Course		Scity Par Bay	3.81-11
9. Riodne 1 Colvell	1313 JAInt GEORGE ST	O'City 6 reen Bay	3-71-1
10. July Miss	2420L Sypamore D	o Town orach Bay	3-31-11
M. d. Mad	Certification of Circulate		· ······
1, 14 (2) 1 1 0 1 (1)	ame of circulator)	, certif	y: •
I reside at 46 CO N, Cedo.	Mator's residence - include number, street, and municipality)	rado 80219	·
I personally circulated this recall petition and person district represented by the officeholder named in this	s petition. I know that each person signed the p	paper with full knowledge of its content	on the date indicated
opposite his or her name. 1 know their respective res §.12.13(3)(a), Wis. Stats.	nucinces given. I support unis recan peution. I at	n awale that faishying this certhication i	a hamananie anaet
<u> </u>	MANDY	signature of circulator)	
(date) GAB-170 (Rev.6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, I	y §§. 8.40 and 9.10, Wis. Stats.	Page No	1922
608-266-8005, http://gab.wi.gov email: gab@wi.gov		L	

TO: WISCONSIN GOVERNM	IENT ACCOUNTABILITY fficial with whom nomination papers or declaration of candid		
We, the undersigned qualified electors of the	30TH WISCONSIN STATE	SENATE DISTRI	CT
petition for the recall of DAVE HANSE	v	•	from office pursuant
to Article XIII, Section 12 of the Wisconsin Co		utes.	
S (The reason for recall must be stated on petitions for the officeholder. No statement of reason is required		The reason must be related to the	
			
	PURPOSES, WHEN DIFFERENT THAN MUN		S NOT SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDE	ENCE DATE OF
SIGNATURES OF EEEE TORS	Rural address must also include box or fire no.	Indicate Town, City, or Villa	0.00.00.0
Barria Cruck	38 to Langsteleste	Town Howe	~ 4-5-11
2. Shant Crain	Carte Or.	□ Town Town Village □ City	1/3/1/
3. JOS ANDERSON	2833 BAYUTE DE	Town Sa Village Han 150	4/5/1/
4. Chris Nachtwey	1189 NIEM CT GB W/ 54303	Town Jaylinge Jayling	d 4/5/1
5. Mar Milt	4413 Milltown Rel	□ Town (Xi) Village Hove and	4/5/11
B-DR. to	1751 VELP AUE	Town Stillage Howarf	9 4-5-11
7. Tor (2004)	JOY9	☐ City ☐ Town ☐ St-Village	(1-4-1/
DET CLAECKE	2785 Lavander der	Town	7-3-11
8. Rita Kielar	Green B	Di City Haward	4-5-11
9. aller & Karr	Isle Shade free CT	ChVillage Howard	4-5-11
10. Gradd Mush	Creen Bay Wi	Town WKVillage City City	1 4-5-11
(.	Certification of Circulate)r	
1. Richard Ay	Madrillater)		_, certify:
I reside at 1065 S. Ayv	res 5 Lakewood colubrations and municipality)	2208 opes	4
I personally circulated this recall petition and person			
district represented by the officeholder named in this opposite his or her name. I know their respective resi			
§.12.13(3)(a), Wis. Stats.	nochees given. 1 support this recan petition. Tal	A A A A 1	- 1 1-xb5
4-5-11	Richard	y H Mach	ill"
(date) GAB-170 (Rev.6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board. F		ignature of circulator)	Page No. 023

608-266-8005, http://gab.wi.gov email: gab@wi.gov

TO: WISCONSIN GOVERNIN	FIGURE ACCOUNT ABILITY fficial with whom nomination papers or declaration of candid	acy for the office is filed)	
We, the undersigned qualified electors of the	30TH WISCONSIN STATE	SENATE DISTRICT	,
	(jurisdiction o	r district of officeholder)	
petition for the recall of DAVE HANSE	(name of officeholder to be recalled and office)	ENATE OF WI_from	office pursuant
to Article XIII, Section 12 of the Wisconsin Co	•	ntes.	
	STATEMENT OF REASON FOR RE		
(The reason for recall must be stated on petitions for			responsibilities of
the officeholder. No statement of reason is required	l to initiate the recall of state, congressional, leg	islative, judicial, or county officials.)	
			
	·		
	G PURPOSES, WHEN DIFFERENT THAN MUN F THE MUNICIPALITY OF RESIDENCE MUST		UFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
1-1-5-1	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
1. all 14/1/	1079 Shaw no ENR	Town Green BAY	0 221
affine the	with Drives	greaty Comments	5-191
2.	ray binns:	□ Town □ Village	3-20/
	Pas Porta DI	Town	10011
3. Vichi P. Renau	CO WITC	Village G-B	3-22-11
2 Milli	1283 Brokwood Dave	□ Town	
* 100 100	Gother Rose WI	UValage 6 B	3-22-11
5. / / 4 4/	1537 7% Street	□ Town	2-22 11
JAN N. JAN		Village 6	3-57-11
6.	1044 MOGS	□ Town	
6. John Shirt		City Ores Day	3-22-11
7.	1801 Pacherland	☐ Town ☐ Yillage	11
	GreenBay 54313	Ecity () (Pen () A)	3-2X-1
8.	1023 weetherd Dr	Town Village	7/19/13
TULET	Defore wishis	TCCity U.	2/00/11
9.	1003 Westwood Dr	☐ Town	1 22 1
Told Con-	Delete WI 5418	City G.3	3-22-11
10. Christian 2011	13Con Condital (1)	Town □ Village (*	3/20/11
Maria das	ISHPLA Bay WISYBIS	Acity (5)	1010211
	Certification of Circulate	or	
SHERRI FORE	2016		y:
201 300	name of circulator)	w EL 30022	
I reside at Circ	culator's residence - include number, street, and municipality)	AT TO BOOK OF	_
I personally circulated this recall petition and perso	anally obtained each of the cignatures on this rea	ner. I know that the signers are electors	of the invisdiction o
district represented by the officeholder named in this	is petition. I know that each person signed the p	paper with full knowledge of its content	on the date indicated
opposite his or her name. I know their respective res	sidences given. I support this recall petition. I ar	n aware that falsifying this certification i	s panishable under
§.12.13(3)(a), Wis. Stats.	5000	n & Ferica	7
(date)		signature of circulator)	
	· ·	- <u>-</u> -	

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.

This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8005, http://gab.wi.gov email: gab@wi.gov

_	RECALL PETITION		
TO: WISCONSIN GOVERNA	MENT ACCOUNTABILITY Official with whom nomination papers or declaration of candid	BOARD dacy for the office is filed)	
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE	SENATE DISTRICT or district of officeholder)	
petition for the recall of DAVE HANSI	· ·	·	office pursuant
to Article XIII, Section 12 of the Wisconsin C	·	tutes.	
•	STATEMENT OF REASON FOR RI		
(The reason for recall must be stated on petitions for	r city, village, town, and school district officials.	The reason must be related to the official	responsibilities of
the officeholder. No statement of reason is required	1 to initiale the recall of state, congressional, leg	gislative, judicial, or county officials.)	
			
			
THE MUNICIPALITY USED FOR MAILING	G PURPOSES, WHEN DIFFERENT THAN MUN	VICIPALITY OF RESIDENCE, IS NOT S	UFFICIENT.
	F THE MUNICIPALITY OF RESIDENCE MUS		
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
1.	4754 Glengreld DR	Town A Grid Town Or To	3-70-11
- Start	Pulaski wi	City 197K	13-20-11
2 James Rappy	1823 Badger St.	City Green Bay	3-20-11
3200 /10/2	1784 WEDGEWOOD	O Town	i
Melian	GREEN BAY	xcity Cleen BAY	3-20-11
MM CV	433 Swebster ave 301	U Town U Village dreen Bay	3-20-11
	Orean Bay	M.City	20 m
5. Q., DDJ	7744 Savid NL	O Village Chase	3-20-11
Ton tente	30)1.36.	City Country	0 - 0 -
6. Colone, Wishh	300 H. Il Crest De	U town	3-20-11
1. / Vily	1480 Weden AVEATE	Town	3-20-4
	072 Hayman at	Town	
Misho Carten	775 1100000131	Village Green Pay	3-20-11
" Jucylan gr	8/5 1/2 Shavens AVE	Drown Drillage Greek Ray	3-20-11
10. Many Waturken	GOG Winford Ave	D Town D Village City	3-20-11
/	Certification of Circulate		
1, SHERRI FERRY	chi_	, certify	;
I reside al 224 BELKSHIP	name of circulator) Le De Cocoa Fl	32922	
(circ	ulator's residence - include number, street, and municipality)		

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under §.12.13(3)(a), Wis. Stats. (

VB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats. s form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 266-8005, http://gab.wi.gov email gab@wi.gov

TO: WISCONSIN GOVERNM	NENT ACCOUNTABILITY fficial with whom nomination papers or declaration of candida	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE	SENATE DISTRICT r district of officeholder)	
petition for the recall of <u>DAVE HANSE</u>			office pursuant
to Article XIII, Section 12 of the Wisconsin Co			
9	STATEMENT OF REASON FOR RE	ECALL	al attack
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	city, village, town, and school district officials. I I to Initiate the recall of state, congressional, leg	The reason must be related to the official is a state of the official is a state of the official of the official is a state of the official of	responsibilities of
			
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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF SIGNING
1 /200 900	Rural address must also include box or fire no.	Indicate Town, City, or Village	4/19/m
1.	Green Bay WI	City Day	1/1/10
2.//		D Villege	
3.		☐ Town ☐ Village	
		C) City	
1 4. 		☐ Village ☐ City	<u> </u>
5.		□ Town □ Village	
6.	 	☐ City	
0. 		☐ Village ☐ City	<u> </u>
7.		☐ Town ☐ Village ☐ City	
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		☐ Cily ☐ Town	
9.		☐ Village ☐ City	
10.		☐ Town ☐ Village	
		□ City	
, inichael Alexa	Certification of Circulate	0r , certi	fv:
CL Murdage	(nerre of circulator)	A 02135	
(cir	reulator's residence - include number, street, and municipality)		
I personally circulated this recall petition and personality circulated by the officeholder named in the	sie netition. I know that each nerson signed the	Daper with this knowledge of its conten-	on the date indicated
opposite his or her name. I know their respective to §,12.13(3)(a), Wis. Stats.	esidences given. I support this recall petition. I a	m an arc that falsifying this certification	is punishable under
L/19/11	/ YI/MAAA/\	XUM	
(date) GAB-170 (Rev.6/2007) The information on this form is required	l by §§. 8.40 and 9.10, Wis. Stats.	(signalure of circulator) Page N	10. 1012/0
This form is prescribed by the Government Accountability Board 608-266-8005, http://gab.wi.gov email: gab@wi.gov	I, P.O. Box 7984, Madison, WI 53707-7984		1174

	RECALL PETITION		
TO: WISCONSIN GOVERNM	TENT ACCOUNTABILITY fficial with whom nomination papers or declaration of candid	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the	30TH WISCONSIN STATE		
petition for the recall of DAVE HANSE	-		office pursuant
to Article XIII, Section 12 of the Wisconsin Co	•	utes.	
	STATEMENT OF REASON FOR RI		
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	city, village, town, and school district officials. I I to initiate the recall of state, congressional, leg	The reason must be related to the officion islative, judicial, or county officials.)	l responsibilities of
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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Norma Parith	1854 DELLIER	Town Utilage SPEENBA	3/2011
2.	1024 Harvez 5 -	Town Usulage Steity Green Bay	3/20/11
2 Sune Vannuullu	1410 Riverside	Town prvillage Supply 20	3/20/11
4. Last Hussin	953 REDLEY CT	O Village CRUEN BAY	3/20/11
5. Enn Vecher	403 N. Platen St	□ Town GB □ Wage ☑ City	3/20/11
6. Cindy Marten	1895 Mirahan St	Town GB	3/20/11
7 Quett Broth	973 Velp ave	Town Urillage Security B	3/20/11
8. David & Vesdy	1066 Mathersot	O Village GB	3/20/1
9. Howard Saleunsk.	5/0 carrie La	© Town @/3 □ Village \$4City	3-20-11
10 Shein J. Suron	3695 CAKEVIEW DE.	o Town Village City Support	3-20-11
	Certification of Circulate	or	
1, SHEKKI FCKR	(name of circulator)	, certi	fy:
I reside at 224 BERKS	HIRE DR - COCOF	7 FL 32923	2
1 personally circulated this recall petition and personal district represented by the officeholder named in the	is petition. I know that each person signed the	paper with full knowledge of its content	t on the date indicate
opposite his or her name. I know their respective re §.12.13(3)(a), Wis. Stats.	istocinces given. I support this recall peritton. Ta	h. S. F. C.	7 h co 0/
(date)		(signature of circulator)	

(date)

*B-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.

**rim is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984

8005, http://eab.wi.gov email: gab@wi.gov

TO: WISCONSIN GOVERNM	1ENT ACCOUNTABILITY Strict with whom nomination papers or declaration of candid		
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE	SENATE DISTRICT	
petition for the recall of <u>DAVE HANSE</u>	•	or district of officeholder) ENATE OF WI from	m office pursuant
·	(name of officeholder to be recalled and office)		•
to Article XIII, Section 12 of the Wisconsin Co	STATEMENT OF REASON FOR RI	•	
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	city, village, town, and school district officials.	The reason must be related to the officia	al responsibilities of
me officenoider. No statement of reason is required	to inmate the recall of state, congressional, leg	ustanve, juaiciai, or county ojjiciais.)	
			
THE MUNICIPALITY USED FOR MAILING	G PURPOSES, WHEN DIFFERENT THAN MUN	ICIPALITY OF RESIDENCE, IS NOT	SUFFICIENT.
<u> </u>	THE MUNICIPALITY OF RESIDENCE MUST	•	<u> </u>
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. hombour	1136 eastman &	Drown Greenbay	4/11/17
2. Planting Tille	Le18 N. Iriwin Ave	Drown Down Day	4/11/11
3. La Fisha Derry	184 Westfield Dr.	o Village Oneida	4/11/11
"an Surace	1325 RONK Ln.	ortown Uvillage Oveida	4/11/11
5. Bud Ond	1456 w. Masm 64	O Town Breen BA	4/11/11
"Espeland!	1602 W. Maywill PO	Town Polar Polar	4/11/11
7. Rande Broson	2010 Libal 54	O Town O Village Strity Once	ANIM
8. DARFUL CAN	308 Chestnat Auc	Ustrage Creen Bay	4/1/17
" Matthew Capozzi	1236 Day St	O Town O Village Gren Bay	4/11/2011
10. Terrell Griffin	1212 South Broadway be	orown Ovillage Green Bay	4-11-11-11
111	Certification of Circulate		
1. Mathy 12 ch	ant o(challator)	, certi	fy:
I reside at 109 Called	Hator's residence - include number, street, and municipality	do 50009	·
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective less	petition. I know that each person sighed the p	aper with full knowledge of its content	on the date indicated
§.12.13(3)(a), Wis. Stats.		Alan-	
(date) GAB-170 (Rev.6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, F	y §§. 8.40 and 9.10, Wis. Stats.	gnature of circulator) Page N	· 102Q

TO: WISCONSIN GOVERNM	1ENT ACCOUNTABILITY ACCOUNTABILITY ACCOUNTABILITY	BOARD acy for the office is filed)	•
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE	SENATE DISTR	ICT ,
petition for the recall of DAVE HANSE	EN , 30TH DISTRICT STATE S	or district of officeholder) ENATE OF WI	from office pursuant
to Article XIII, Section 12 of the Wisconsin Co	(name of officeholder to be recalled and office) constitution and §.9.10 of the Wisconsin Stat	utes.	
•	STATEMENT OF REASON FOR RI		
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required			
II .	G PURPOSES, WHEN DIFFERENT THAN MUN F THE MUNICIPALITY OF RESIDENCE MUST		IS NOT SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESID Indicate Town, City, or Vi	
1. Tan Paris	2397/du	Town Village My Cuc	4-8-11
2.	3826 Chitensh	Town Or Tillage Or Beach B	as 4-8-11
3. Guillerno treso	1904 HSHLAWDN	□ Town □ Village ArCity 6 V C C N	Bux 4-8-11
1. Diosa saucedo	1131 moriane way	o Town Village Green Ba	4-8-11
5. Tyler Gorst	122 5. Ashland	U Town U Village G [Cen D	Pay 4-8-11
6. J		□ Town □ Village □ City	
7.		□ Town □ Village □ City	
8.		☐ Town ☐ Village ☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		□ Town □ Village □ City	
I Mark Visil	Certification of Circulate	or	, certify:
I reside at 4620 - W. Cedar	name of circulator) Que New Color ulator's residence - include number, street, and municipality)	rados 80	219
I personally circulated this recall petition and person district represented by the officeholder named in thi opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.	mally obtained each of the signatures on this pays petition. I know that each person signed the petidences given. I support this recall petition. I are	paper with full knowledge of its naware that falsifying this cert	s content on the date indicated
GAB-170 (Rev 6/2007) The information on this form is required to This form is prescribed by the Government Accountability Board, 608-266-8005, http://gab.wi.gov email: gab@wi.gov	by §§. 8.40 and 9.10, Wis. Stats.	ignature of circulator)	Page No. 1939

GOVERNMENT ACCOUNTABILITY undersigned qualified electors of the 30TH WISCONSIN STATE SENATE DISTRICT (jurisdiction or district of officeholder) etition for the recall of DAVE HANSEN, 30TH DISTRICT STATE SENATE OF WIL from office pursuant (name of officeholder to be recalled and office) to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes. STATEMENT OF REASON FOR RECALL (The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.) THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED. DATE OF MUNICIPALITY OF RESIDENCE SIGNATURES OF ELECTORS STREET & NUMBER OR RURAL ROUTE SIGNING Rural address must also include box or fire no. Indicate Town, City, or Village □ Town **X**Village City 🗅 □ Town □ Village © City □ Town □ Village ZÓ City □ Town □ Village -20--(/ **D**City □ Town 5. Village **Q**€ity □ Town □ Village **Q** City □ Town Q Village City □ Town □ Village City ☐ Town □ Village **O**City □ Town □ Village Certification of Circulator certify: (circulator's residence - include number, street, and municipality)

\$.12.13(3)(a), Wis. Stats.

Show the form is required by \$8.8.40 and 9.10. Wis. Stats.

Show the form is required by \$8.8.40 and 9.10. Wis. Stats.

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under

GAB-170 (Rev.6/2007) The information on this form is required by §§ 8.40 and 9.10, Wis. Stats. This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. 99)

ISCONSIN GOVERNMENT ACCOUNTABILITY BOARD

	uctal with whom nonlination papers of decisiation of candid	acy for the office is filed)	•
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE	SENATE DISTRICT or district of officeholder)	
petition for the recall of DAVE HANSE	V	•	office pursuant
to Article XIII, Section 12 of the Wisconsin Co.	nstitution and §.9.10 of the Wisconsin Stat	utes.	
	TATEMENT OF REASON FOR RE		
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required			responsibilities of
	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		UFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Tu fum f	SBJ Molly Bows La Green Bay, WI	O Town Heward	4/5/11
2. But What	1035 COPKINUS CT	Drown City Jown How AR d	4/5/11
3. Josephan O Kumps	Green Par UT 54313	Town Selvillage City City	\$15111
4. US My Michael	2937 Nikki Lee Ct Gran Buy W1 54313	D Town M-Village Colored Co	4/5/11
5. Carol Jane	Green hay W1 5133	D Town GVillage City	4/5/11
6. Sal M. Frague	Green Bee WIF431	D Town Styllage Howard	4/5/11
7.	1003 Koburs hurj	Town Q Village City Carrier	4/5/11
8.	393B BAY LITE DR GREEN BAY 54313	O Town	4/5/11
9.	1064 PAND DR GREEN BAY UI	Town Styllage City HOLLYTAIN	4/3/11
10.	827 Hanguard Wing	D Town SECVILLAGE City FORWARD TOWN T	415111
	1 07 eq. 27		<u></u>
1, Richard A Madri	Certification of Circulato	Or, certify	:
I reside at 1065 8, Ame		DJJOB obni	·
I personally circulated this recall petition and person	ally obtained each of the signatures on this page	per. I know that the signers are electors of	of the jurisdiction or
district represented by the officeholder named in this opposite his or her name. I know their respective resi §.12.13(3)(a), Wis. Stats.	petition. I know that each person signed the p	paper with full knowledge of its content on aware that falsifying this certification is	on the date indicated
9.12.13(5)(a), WIS. SIAIS. 4-5-1/	Ruhard	A Madrill In	
(date)		signature of circulator)	

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats. This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. MU

	RECALL PETITION		
TO: WISCONSIN GOVERNI	MENT ACCOUNTABILITY (official with whom nomination papers or declaration of candi	BOARD	
We, the undersigned qualified electors of the			
•	(junsdiction	or district of officeholder)	
petition for the recall of DAVE HANS	EN, 30TH DISTRICT STATE S	SENATE OF WIfrom	n office pursuant
to Article XIII, Section 12 of the Wisconsin ((name of officeholder to be recalled and office) Constitution and 8 9 10 of the Wisconsin Sta	tutes	
,	STATEMENT OF REASON FOR R		
(The reason for recall must be stated on petitions for	or city, village, town, and school district officials	The reason must be related to the officie	al responsibilities of
the officeholder. No statement of reason is require	ed to initiate the recall of state, congressional, le	gislative, judicial, or county officials.)	<i>y</i>
			
			
THE MUNICIPALITY USED FOR MAILIN	G PURPOSES, WHEN DIFFERENT THAN MUI	NICIDALITY OF DESIDENCE, 10 NOT	OVER 10 10 10 10 10 10 10 10 10 10 10 10 10
THE NAME O	F THE MUNICIPALITY OF RESIDENCE MUS	T ALWAYS BE LISTED.	SUFFICIENT,
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
R	2252 Barberry (2	Town	3/2
2 1900	2343 Fartin Ave # 2	D Town	
2 Staller	7,0 100 100 10	U V#age 65	3/20/11
3. 2 A1 C1 1	2515 Dakwood Dr.	□ Town	
Bulile Schwartz	G. B.	Village S S	3.20/11
4.01004	156 Evanus Am	☐ Town☐ Village ☐ 6	
THE RELLE	Green Buy 54363	Dicity 63	3-26-11
s. Felissa Sangkhammee	24 South Oneida st	☐ Town ☐ Village	
6. AMBER J. OXXENS ()	Grun Bay 54303	p City 6b	3-10-11
Profession ()	230 N. Dakland	□ Town □ Village	3/20/11
7. 1 (1)	2721 Manitonoc Rd.	Town	
Kra Tine	. 2 -	Village & & & .	3/2/11
8. 4///	2689 Indian HU Dr	Town	7 7
Jany Mayo	Green Bay	□ Village 6 €	312014
9.	1684 B-Cooperate	1 Town	1.
Theora He	Gran Bun	O Village G B	3-20-11
103 MM Janus Bringer	2494 lands lane	□ Town □ Village	2/20/11
JIVan 10 Louis	Brungay	City CD	5/20/1/
511-001 Fo 00	Certification of Circulato	r	
SHERRY FERRY	ell	, certify	r:
(name of circulator)			

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under 1.12.13(3)(a), Wis. Stats.

(circulator's residence - include number, street, and municipality)

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TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY ficial with whom nomination papers or declaration of candid			
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE	SENATE DISTRICT or district of officeholder)		
petition for the recall of DAVE HANSE	(name of officeholder to be recalled and office)	ENATE OF WI from	office pursuant	
to Article XIII, Section 12 of the Wisconsin Co.	nstitution and §.9.10 of the Wisconsin State	utes.		
	TATEMENT OF REASON FOR RE			
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required			responsibilities of	
II .	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		UFFICIENT.	
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE	DATE OF SIGNING	
1. 21 SI MITE	3105 Riverside DV	Indicate Town, City, or Village Town UVillage	4/5/2011	
2. 10 1 C fi	2922 Brookview Ct	Drown Devillage	1121.	
3. P	Green Bay WI 54813	City Haward	4/5/11	
tomes (antico	290x Port Rd	Ocity Howard	415/11	
1. March trailt	3703 POLO 1461	Do city Cree, Ba, With	4-5-11	
s. Jaunie Hof	003 Kick Dolong E	Strillage Law and	4-5-11	
6. Sugar Toldey &	906 PAWN DR.	D Town DENVILLEGE HOWARD	4-4-11	
7. De li ise Bellingone	1070 Coprinus Ct	D Town Devillage	4-5-11	
8. John Beauleau	2704 Glendale AVE	□ Town X Village	4-5-11	
9. Stander	3522 CHATSUCRTH DR	☐ Town		
10()	LREEN BAY WI SUBJE	City HUNARD	4-5-11	
Lkb (indersor	Freen Bay, W= 54313	City Howard	4-5-11	
Certification of Circulator				
I, Kichard A Madei	me of circulator)	, certify	:	
I reside at 10.65 5, Ames	lator's residence - include number, street, and invincipality)	ad 7 80726	·	
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective resis §.12.13(3)(a), Wis. Stats.	petition. I know that each person signed the p	aper with full knowledge of its content of	n the date indicated	
4-5-1/ (date)	_ Richard	A Madul For		

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats. This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8005, http://gab.wi.gov email: gab@wi.gov

TO: WISCONSIN GOVERNM	<u>MEINT ACCOUNTABILITY</u> Official with whom nomination papers or declaration of candid	BOARD acv for the office is filed)	
		SENATE DISTRICT	
We, the undersigned qualified electors of the _	(jurisdiction o	r district of officeholder)	
petition for the recall of DAVE HANSE	(name of officeholder to be recalled and office)	ENATE OF WI from	office pursuant
to Article XIII, Section 12 of the Wisconsin C		utes.	
	STATEMENT OF REASON FOR RI		
(The reason for recall must be stated on petitions for	r city, village, town, and school district officials.	The reason must be related to the officia	l responsibilities of
the officeholder. No statement of reason is required	d to initiate the recall of state, congressional, leg	islative, judicial, or county officials.)	
			
			
	G PURPOSES, WHEN DIFFERENT THAN MUN F THE MUNICIPALITY OF RESIDENCE MUST		SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
1. Fotom Formal	404 DEWEY DECKER DR	Town Scivillage #OWARD	4-5-11
TATRICIA FICRDELLISI	2544 Lund +h	□ City // C LO 17 R_D	<u> </u>
2. JAMES BRABANT	Chem BAY .54313	City Howith	4-5-11
3.01 20 1277112	2450 Humping Dird or	□ Town	111 (2)
MELAN VILLE I MATELLET	Granton W. 54303	ocity Howard	415/11
4. The klass	Green Bay W 5431	Drown B'Village City Low	4/5/1
5. Per lung	1068 Schanock dr	D Town Strillage City Howard	4/5/11
- www	Green Bay Win 54303	□ Town	11111
6. GREGO HEUGE	CONSIN BILL WE, 74703	City Howard	4/5/1/
7. Pryndy Bens	1865 BROCKWAEW O'KING	D Town HWWK.C	41811
8. Q. Car. Caling an	131 Remarder	Town Journal	4/5/11
8. Shuly Cluemm	Green Bay 54303	☐ City	1121.
9 ()	0	☐ Town ☐ Village	
		☐ City	_
10.		□ Village □ City	
			
, Mack Viail	Certification of Circulate)r , certif	v:
	name of circulator)	1 000	-
I reside at 4620 W. Ceda	culator's residence - include number, street, and municipality)	elorado 802	<u>[</u>
·		I i di a d	-Caba indication o
I personally circulated this recall petition and perso district represented by the officeholder named in th	is petition. I know that each person signed the p	paper with full knowledge of its content	on the date indicated
opposite his or her name. I know their respective re-	sidences given. I support this recall petition. I ar	n aware that falsifying this certification	is punishable under
§.12.13(3)(a), Wis. Stats.	Mach		
(date)		signature of circulator)	
GAB-170 (Rev.6/2007) The information on this form is required This form is prescribed by the Government Accountability Board,		Page N	o. 1944

608-266-8005, http://gab.wi.gov email: gab@wi.gov

TO: WISCONSIN GOVERN	MENT ACCOUNTABILITY (official with whom nomination papers or declaration of candi		
We, the undersigned qualified electors of the	· ·	-	
•	(jurisdiction	or district of officeholder)	
petition for the recall of DAVE HANS	SEN, 30 TH DISTRICT STATE S (name of officeholder to be recalled and office)	SENATE OF WIfrom	office pursuant
to Article XIII, Section 12 of the Wisconsin		tutes	
to mile of the section 12 of the Wisconsin	STATEMENT OF REASON FOR R		
(The reason for recall must be stated on petitions)	for city, village, town, and school district officials.	The reason must be related to the official	responsibilities of
the officeholder. No statement of reason is requir	red to initiate the recall of state, congressional, le	gislative, judicial, or county officials.)	
	NG PURPOSES, WHEN DIFFERENT THAN MUI OF THE MUNICIPALITY OF RESIDENCE MUS		UFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
411	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
AlD. Motorus	JEH Fralesy St	Town / reen Buy	4/11/11
Mary Mary	277/1/5	O'eity // ECIV P	1/10/11
2.	3744 DUMINICESET	B-Village VI Q M II Q	1411/12
3 / 2 / 000 /	2799 Summer set Circle	City — COMPANIES	1
Warid Mochrine	Suamico Wi 54M	City Suamteo	4-11-11
4.BQ-R C-	2761 Humboutted	O Town O Village Water	4-11-11
5. If Dark Palmy	822 N Inglin	U Town	4-11-54
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Town Deut half	161111
1 Victory Carr	C 420/180 DAY ST	City Wall Dig	9-11-11
"SgrahRath	- 108 N. Broaderay	O Town O Village PCCity Green Boy	4-11-1
8. Klam Viten	308/2 matter	Town Usuage City G./B	4-11-11
9. Nick Hernande	2 30% s. mepte	Town Utilage 6 B	4-11-11
10. Steve Serens	507 Sopraph	Town Utilage	cf-//-//
	Cartification of Cinculat		<u> </u>
1. 11 lastrew 1921	Certification of Circulate	Dr , certify	v:
I reside at 909 to Viz	(name of cifculator)	lorado, 20019	
	redator's residence - include number, street, and municipality)		
I personally circulated this recall petition and pers district represented by the officeholder named in t			
opposite his or her name. I know their respective r §.12.13(3)(a), Wis. Stats.			
\$12.13(3)(a), W13. 31815.		V KUA TOM	-
(date)	- V	signature of circulator)	
GAB-170 (Rev.6/2007) The information on this form is require This form is prescribed by the Government Accountability Board 608-766-8005, http://osb.wi.gou.email.osb@wi.gou.		Page No.	1945

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY ficial with whom nomination papers or declaration of candid:	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE	SENATE DISTRICT or district of officeholder)	
petition for the recall of <u>DAVE HANSE</u>	N , 30TH DISTRICT STATE S	ENATE OF WIfrom	office pursuant
to Article XIII, Section 12 of the Wisconsin Co	,	utes.	
S (The reason for recall must be stated on petitions for	TATEMENT OF REASON FOR RE		responsibilities of
the officeholder. No statement of reason is required	to initiate the recall of state, congressional, leg	islative, judicial, or county officials.)	
	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		UFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. web weber Koure	1411 N Victor	Town Ciliage Antickin, Wi	300010
2. Dryn Kennedy	JB.	Town B Bleen Buy	3/-37-1
3 Salpher Clay	328 Gidgemen Terr	Town Village Afford 4	3/27/11
4. Grales	Coleman Coleman	Town Village Columbia	3/27/1
5. Januel albert	2804 V 11K 1 ng F	Parown Dyllage Cheeh Bay	3-27-1
6. Com Nacher	339 S. Huron S.	O Town O Village SCity De Paco	3-27-11
2 January & Salar	ME S. YEKSX	D Town D Village	3-27-11
8. Migro Hayer	1277 J. KDWES CT	D Town Styllage City SVAMICO	3-27-11
Stephenu Hankus	14282 Halvilw Circle Pulaski in 54162	o town Pittsfield	3-27-11
10. Richard Burra	829 minitwish P1	Town O'Village G/ CTh Co. 8	3271
Mill	Gertification of Circulate		
1, 10 S S S S S S S S S S S S S S S S S S	ame of circulator)	, certify	1: -1 <i>C</i> o
I reside at (circu	allators residence - include number, street, and municipality)	0101000 / 800	
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.	s petition. I know that each person signed the p	paper with full knowledge of its content of	on the date indicated
3-07-11		Hay	
(date) GAB-170 (Rev 6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, 1 608-266-8005, http://pab.wi.gov.email; gab@wi.gov	oy §§. 8.40 and 9.10, Wis. Stats.	Page No	1946

608-266-8005, http://gab.wi.gov email: gab@wi.gov

TO: WISCONSIN GOVERNA	MENT ACCOUNTABILITY official with whom nomination papers or declaration of candi	BOARD dacy for the office is filed)	
We, the undersigned qualified electors of the			
petition for the recall of DAVE HANSE	•	or district of officeholder) SENATE OF WILL from	n office pursuant
	(name of officeholder to be recalled and office)		a canto parozan
to Article XIII, Section 12 of the Wisconsin C	•		
(The reason for recall must be stated on petitions for	STATEMENT OF REASON FOR RI r city, village, town, and school district officials.		l responsibilities of
the officeholder. No statement of reason is require	d to initiate the recall of state, congressional, leg	gislative, judicial, or county officials.)	
			<u> </u>
F			
	G PURPOSES, WHEN DIFFERENT THAN MUN F THE MUNICIPALITY OF RESIDENCE MUS		SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
10/10/	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
"/XULL JUNNS	Grunbay WI. DYBUT	Grity 1940 Buy	411/11
2. 1 . 8 . 6	14315, Touglan	O Town	4/11/11
The Office	6/cen Ray 5/304	Town	1/2/11
Tag (an	60 WISY 311	Over B	4/11
4.	815 Lewis 3t	Grown □ Village	701
The Hoge	1401 16 1 1 4	City Depare	4////
5. May Laye	54115-	Village De Pare	19/11/11
6.		□ Town □ Village	1 1
· · · · · · · · · · · · · · · · · · ·	•	□ City	<u> </u>
7.		☐ Town ☐ Village ☐ City	
8.		□ Town	
		□ Village □ City	ļ —— ————
9.		☐ Town ☐ Village	
10.		□ City □ Town	ļ
		□ Village □ City	
	Certification of Circulate)r	
1, Mathew Dechal	name of circulator)	, сеніf	y:
I reside at TUS Falle	ulator's residence - include number, street, and municipality)	16,96719	
l personally circulated this recall petition and person		per. I know that the signers are electors	of the jurisdiction or
district represented by the officeholder named in thi opposite his or her name. I know their respective res	s petition. I know that each person signed the p	aper with full knowledge of its content	on the date indicated
§.12.13(3)(a), Wis. Stats.	Brown roupport ons recall behind.	He and the strying this continuation i	a bemananie minet
(date)		ignature of circulator)	
GAB-170 (Rev.6/2007) The information on this form is required by	y §§. 8.40 and 9,10, Wis. Stats.	Page No	all
This form is prescribed by the Government Accountability Board, I 608-266-8005, http://gab.wi.gov_email; gab@wi.gov	r.O. 190x 7984, Madison, W1 53707-7984	1	17411

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY ficial with whom nomination papers or declaration of candida		
We, the undersigned qualified electors of the	• •	SENATE DISTRICT	
	(jurisdiction o	r district of officeholder)	
petition for the recall of DAVE HANSE	(name of officeholder to be recalled and office)	ENATE OF WI from	n office pursuant
to Article XIII, Section 12 of the Wisconsin Co.	nstitution and §.9.10 of the Wisconsin State	ites.	
	TATEMENT OF REASON FOR RE		
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	city, village, town, and school district officials. It	The reason must be related to the officials)	il responsibilities of
ine ojjicenoiaer. Ivo statement oj reason is required	w minute the recall of same, congressional, leg		
	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
1. John - 12 DO -	443 Carling In	Town X(Village H A A A A	4-4-11
and from	943 HARWOOD AUR	□ City / O O O O O O	
2 On Cant	1943 HATWOOD NO	Ocity HOWARD	4-5-11
3. P. Jack A Squit	1801 Lenwood Ave	□ Town	0 /-11
3. Robert Janes		City Howard	4-5-11
4.	981 N. Bylarst	Drown City Howard	4-5-11
To the state of th		Extown_/	+ ' ' '
5.0	2481 Roman	O City	74-5-761
6.	27/0 Wood fulled Bi	□ Town / /	1
Junio Jan	6.3. 543/4	City / Ocrac	4-5-11
7.	1130 Herry Brywry	Jown Styllage	4-54)
Chis Delate	6B 24313, 0	□ City Co. C.	
8. 12, 12, 12 (tel	Grengay W= 54313	Town MCVCV	H-5-11
7.24	GALENGAY WI- 54313	☐ City	
2 LANNIN 6 Stelant	GREAN BAY WI SYDD	-bi-Village HOWARD	9-5-11
10.	323 Vildos Ct	Town SAvillage	
11-11 / N	6B LUT 54313	city HOLVAND	19-5-1/
(9/M. (12) VII.	Certification of Circulate	or	
I, Walk Vis	ame of circulator)	, certi	fy:
I reside at 4620 W. Cedas.		rado 80219	·
Y	cally abtained each of the cionethres on this pa	oor. I know that the cianers are elector	e of the jurisdiction or
I personally circulated this recall petition and person district represented by the officeholder named in this	petition. I know that each person signed the p	paper with full knowledge of its conten	t on the date indicated
opposite his or her name. I know their respective resi	idences given. I support this recall petition. I ar	n aware that falsifying this certification	is punishable under
§.12.13(3)(a), Wis. Stats. \mathcal{U}_{-} 5 -]	Na 1.11	-	
(date)		ignature of circulator)	
GAB-170 (Rev.6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, F	y §§. 8.40 and 9.10, Wis. Stats.	Page 1	10. MUS
608-266-8005, http://gab.wi.gov_email: gab@wi.gov		<u> </u>	_\\

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY ficial with whom nomination papers or declaration of candid		
We, the undersigned qualified electors of the	30 TH WISCANSIN STATE	SENATE DISTRICT or district of officeholder)	<i>_</i>
pelition for the recall of DAVE HANSE	(name of officeholder to be recalled and office)	ENATE OF WI from	office pursuant
to Article XIII, Section 12 of the Wisconsin Co	Ť		
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required		The reason must be related to the official	responsibilities of
	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		UFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also jnclude box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
Eugene J. Robbe	Sien Bay, W/.	Town Willage Forward.	4-5-11
2. From Bring (CRRRI BALLET	Doty Hoard	4-5-11
3. Landre C. Llimin	2748 Hally/Way CKEN BAY	D Town Dr. Village Howard	4-5-11
4. Juna Munday	2800 Dewley Decker A	D Town Sa Village Howard	4.5.11
5. Open	Ear Bry Wil	D Town PVillage HOWAW	4-5-1)
6. Bret & Hard	Bren Bus Wal	D Town O City Howard	4.5.11
7. Suit Churtian	307 Woods D. 621 W 54313	D Town O Village D City Low Land	4-5-11
8. Au	SUC TONY/LANE GREEN BAY WI54303	D Town Howax7	4-5-11
9. Jim Baria	1669 Lenwood AV#8	Town Willage Howard	4-5-11
100		□ Town □ Village	
Marly Vieil	Certification of Circulato	nr , centify	
I reside at 4620 W. Ceda	me of circulator) COVE. Denver Cator's residence - include number, street, and municipality)	plarado 802	19
I personally circulated this recall petition and personal district represented by the officeholder named in this opposite his or her name. I know their respective resident and the second seco	petition. 1 know that each person signed the p	aper with full knowledge of its content of	on the date indicated
(date) GAB-170 (Rev 6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, P. 608-266-8005, http://gab.wi.gov email: gab@wi.gov	§§. 8 40 and 9.10, Wis. Stats.	ignature of circulator) Page No	1949

TO: WISCONSIN GOVERNM	SENT ACCOUNTABILITY fficial with whom nomination papers or declaration of candid	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE	SENATE DISTRI	CT
petition for the recall of DAVE HANSE	·	r district of officeholder) ENATE OF WI	from office pursuant
to Article XIII, Section 12 of the Wisconsin Co	•	ites.	
·	STATEMENT OF REASON FOR RE		
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required			
	<u> </u>		
	GPURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		S NOT SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDE Indicate Town, City, or Villa	
1. In Startacher	Gya Riverest Rd Green Bay in 543/3	D Town D J W Z	4/5/11
2. Alda Spechalski	Mrsen Bray 34313	D Town A Village Howard City	4.5-11
3 Barb Fraul	Theor Bay	D Town D Village Howard	4/5/-11
1 Joan Con Catales	Green Bay WI 5433	Town Willage Howard	4/5/11
5. Kassic Soulek	Suance WI 54177	Town For Village Suence	4/5/11
6.7 Michael Strickenbach	Drem Bay, Wi	D Town Award	4/5/11
7- Thomas of illime	2825 ICH4300 W	D Town Styllage City ARD	4/5/11
8 Barb Sebmeyer	1116 Fotest Grove 6.B. 54313	Dr. Town Pr. Millage City	4/5/11
"Cher & Badler	1268 Cardinal Ln areen Ray ht	Town So Village Sward	4/5/11
10. Catherine J. Hell	2800 Latierter In	□Town AVillage Howard	4/5-//
	Certification of Circulate	or	· · · · · · · · · · · · · · · · · · ·
I, Richard H Wlad	ame of circulator)		, certify:
I reside at 1065 S. Ames	3 54 La Kewrourd Co) ulator's residence - include number, street, and municipality)	orado SUZZ	<u>(</u>
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.	s petition. I know that each person signed the p	aper with full knowledge of its a aware that falsifying this certif	content on the date indicated ication is punishable under
4-5-11	_ Richard	A Marchael #	
(date) GAB-170 (Rev.6/2007) The information on this form is required by the Government Accountability Board, I 608-366-8005, bits //ash wi gov. empil. gab@wi gov.		ignature of encoratory	Page No. 150

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY ficial with whom nomination papers or declaration of candid	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the	30TH WISCONSIN STATE	SENATE DISTRICT	
petition for the recall of DAVE HANSE	(jurisdiction o	r district of officeholder)	office pursuant
	(name of officeholder to be recalled and office)		ornee parsuum
to Article XIII, Section 12 of the Wisconsin Co			
S (The reason for recall must be stated on petitions for	TATEMENT OF REASON FOR RE city. village, town, and school district officials. I		responsibilities of
the officeholder. No statement of reason is required			,
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·	lator's residence · include number, street, and municipality)	Throughout the singer are also trained	of the included as
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective residence in 12 12(2)(2) Win State	petition. I know that each person signed the p	aper with full knowledge of its content of	on the date indicated
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(date)		ignature of circulator)	

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://pab.wi.gov email: gab@wi.gov

TO: Government A	RECALL PETITION	L Wiscons	sin
We, the undersigned qualified electors of the		strict WI	sconsin
pellition for the recall of State Senator Dave Hansen 30th District from office pur quant			
to Article XIII, Section 12 of the Wisconsin C	(name of officeholder to be recalled and office) onstitution and S. 9.10 of the Wisconsin Sta	atules.	·
STATEMENT OF REASON FOR RECALL (The reason for recall must be stated on petitions for city, viltage, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)			
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Kalence Titte	Green Bay WI57303	Dicity Suam,	ico 3-3-11
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3. Lavie Lewon	1553 HOULKI NIGHT	TO YOUND	n 33-11
1. Joan Bracese	13622 Jaile KJ Deen 1304 54313	D Town Village City Sualite	ieo 3-3-11
5. Bloria Christens	1943 Siestlita FerenBay 54313	D Town R.Village Sucumic	cv 3-3-11
6. Raymond Christian	2 Susta Ln	O Town O Village O City Suan	ces 3-3-11
1. Kocart transl	3602 ForbRD	O Town N.Vitege See	1-3-11 1-3-11
8. n. arie konski	Suamies WI	O Town ON VILLAGE O CRY DUAME	es 3-4-11
"monica muz	830 Longtail Bek Rd Suamilio Wi (4113)	O TOWN O VIVAGO O CITY Luame	us 3.4.11
10. Jan mutz	830 Longton Beach	Grown Scann	ico 3-4-11
Jean Forr	Certification of Circulator	r	
I reside at 723 Sunset (carelle	Snamino, WI 54/13 Certification of Circulator Confederation Con	nico WI	, certify:
I personally circulated this recall petition and personal district represented by the officeholder named in this popusalte his or her name. I know their respective resid S. 12.13(3)(a), Wis. Stets.	petition. I know that each person signed the par	per with full knowledge of i	is content on the date indicated
3-2-11	_ Jenn 71	7. Farre	el
(date) BB-170 (Rev. 7/2001, page no. bux added 8/2005) The information of This form is prescribed by the State Elections Board, P.O. Rox 2973, 608-266-8005, http://elections.tate.vi/us		eature of circulator)	Page Nu. 1952

TO: WISCONSIN GOVERNO	MENT ACCOUNTABILITY Official with whom nomination papers or declaration of candid		
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE	SENATE DIST	21CT
petition for the recall of DAVE HANS		or district of officeholder)	from office pursuant
	(name of officeholder to be recalled and office)		non ornce pursuant
to Article XIII, Section 12 of the Wisconsin C	ŭ		
(The reason for recall must be stated on petitions fo	STATEMENT OF REASON FOR RI r city, village, town, and school district officials.		the official responsibilities of
the officeholder. No statement of reason is require			
	G PURPOSES, WHEN DIFFERENT THAN MUN F THE MUNICIPALITY OF RESIDENCE MUST		E, IS NOT SUFFICIENT.
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	Certification of Circulate	r	
I. Debra RAZO		 .	, certify:
I reside at 1500 Withe Rd.	name of circulator) #12 Houston, TX - 7	7080	-
	rulator's residence - înclude number, street, and municipality)		
I personally circulated this recall petition and perso district represented by the officeholder named in this opposite his or her name. I know their respective respective respective respective.	is petition. I know that each person signed the p	aper with full knowledge of i	ts content on the date indicate
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(date)		ignature of circulator)	
GAB-170 (Rev.6/2007) The information on this form is required. This form is prescribed by the Government Accountability Board, 608-266-8005, http://gab.wi.gov/email;gab@wi.gov/			Page No. 1953

We, the undersigned qualified electors of the 30 TH WISCONSIN STATE SENATE DISTRICT (jurisdiction or district of officeholder) petition for the recall of DAVE HANSEN, 30 TH DISTRICT STATE SENATE OF WI from office pursus (name of officeholder to be recalled and office) to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes. STATEMENT OF REASON FOR RECALL (The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.) THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.	
to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes. STATEMENT OF REASON FOR RECALL (The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)	
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(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)	s of
THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.	
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THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.	
SIGNATURES OF ELECTORS STREET & NUMBER OR RURAL ROUTE MUNICIPALITY OF RESIDENCE SIGNING S	
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10. Cr 15+al 21 Hoth -st 0 Town 0 Village 3 29	} - 11
Certification of Circulator	
I, Ookey Jours, certify:	
I reside at 1452 Adm. col Covet #4 5 4303 Wisconsin Green Bay (circulator's residence - include number, street, and inunicipality)	<u> </u>
I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdic district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date in opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable to §.12.13(3)(a), Wis. Stats.	idicated
3/29/1/ Coner Janet	

GAB-170 (Rev. 6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis Stats. This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8005, http://gab.wi.gov email: gab@wi.gov

	RECALL PETITION		
TO: Government Ac	Countability Board	WISCONSIN acy for the office is filed)	
We, the undersigned qualified electors of the	30th Senate Dis	trict Wisconsi	<u></u>
potition for the recall of State Sens	tor Dave Hansen 3	Oth District from	i office pu स्टब्स
to Article XIII, Section 12 of the Wisconsin Co		tutes.	
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(Increason for recall must be stated on petitions for city, village, lown, and school district officials. The reason must be related to the official responsibilities of the officialer. No statement of reason is required to initiate the second of state, congressional, legislative, judicial, or county officials.)			
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JOHN BERK	negge of curviletor)		Ť
Freside at 3561 PINE	TO REST On micros's residence - include number, street and municipality?		<u>54113</u>
I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S. 12.13(3)(a), Wis. Stats.			
04/05/11	- The	le ren	
The Fig. 170 (Rev. 17703), page no. box edded 872005. The information of first form is presented by the State Elections Roard, P.O. Box 29 608-765-8005, http://decarear.state.vei.us	on on this form is required by Ss. 8.40 and 9.10, Wis. Stats.	(signature of circulator)	• 1955

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY ficial with whom nomination papers or declaration of candida	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE (jurisdiction o	SENATE DISTRICT or district of officeholder)	
petition for the recall of <u>DAVE HANSE</u>	(name of officeholder to be recalled and office)	ENATE OF WIfrom	office pursuant
to Article XIII, Section 12 of the Wisconsin Co	·	utes.	
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required		The reason must be related to the official	responsibilities of
	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		UFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
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6. Evan Pickarod	153 Harwood 1	O City C L Called	3-8-11
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10. 10 hand hand	1145 WESTON	□ Town □ Village ②のが しょことれんへ\	3 291/
I Corey Jones	Certification of Circulate		
I reside at 1452 Sancal Co	ame of circulator) OURF 44 54333 (lator's residence - include number, street, and municipality)	reen Bay Wisc	consia.
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective resi §.12.13(3)(a), Wis. Stats.	ally obtained each of the signatures on this page petition. I know that each person signed the p	aper with full knowledge of its content of	on the date indicated
3/29/11	_ Coury	1/our	
(date)	C/(s	signature of circulator)	

4/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.
Sed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984

p://gab.wi.gov email: gab@wi.gov

Page No. \956

	Technique de la constant de la const			
TO: Government Accountability Board Wisconsin (official with whom nomination papers or declaration of candidacy for the office is filed)				
TO: GOVERNMENT TO	cial with whom nomination papers or declaration of candidate	y for the office is filed)	•	
We, the undersigned qualified electors of the	30th Senate Dis	district of officeholder)		
petition for the recall of State Seng	tor Dave Hansen 30	oth District	_from office pv pant	
to Acticle VIII Section 12 of the Wisconsin Cor	estitution and S. 9.10 of the Wisconsin State	ıles.		
S	TATEMENT OF REASON FOR RE	CALL	official responsibilities of	
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1. James a. Christenson	GREEN BAY, WI. 54302	(3-City		
201 11 01 11	2440 Newberry Avi	El Village	3-5-11	
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Judy Farace	Brean Bay, 41 34313	I don't I was been		
, ,	Certification of Circulat	or	ate	
Lee Christenson, certify:				
(osac of circulator) Cresen Bay				
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I personally circulated this recall petition and personal	onally obtained each of the signatures on this pa	oper. I know that the signers are	content on the date dicated	
I personally circulated this recall petition and person district represented by the officeholder named in the opposite his or her name. I know their respective respective receives the contraction of the page of the person of t	is petition. I know that each person signed the	im aware that falsifying this cert	ification is punishab ⁱ meler	
opposite his or her name. I know their respective to	Siliences given I support and	00-		
S. 12.13(3)(a), Wis. Stats.	(1,1,1,0)	Kristenton		
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pp 170 (Per 7/2007 ppe no box added \$/2005) The informat	lon on this form is required by Ss. 8.40 and 9.10, Wis. Stats. 973 Medison, WI 53701-2973		Page No. 1957	

This form is prescribed by the State Elections Board, P.O. Box 2973, Madison, WI 53701-2973 602-266-3005, http://elections.state.wi.us

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY ficial with whom nomination papers or declaration of candid	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the	30TH WISCONSIN STATE	SENATE DISTRICT	
petition for the recall of <u>DAVE HANSE</u>	N, 30TH DISTRICT STATE S	_	m office pursuant
to Article XIII, Section 12 of the Wisconsin Co	(name of officeholder to be recalled and office) Institution and §.9.10 of the Wisconsin State	utes.	
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(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	city, village, lown, and school district officials. I to initiate the recall of state, congressional, leg	ine reason musi be retated to the officials.) islative, judicial, or county officials.)	ai responsionnes oj
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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
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Christian 1 hourses	42240 conto Do	Stown Monthly Con	3/2/111
Stephania Mayon	Wabe	Ovillage Ciabeno	3/29/11
3. Eka 17 Balok	724 Ni MERCORIA CIV	O Town O Village DE PERE	3/29/11
4. Ribers Mun(N34 W7248 BUCK WASLEN IT	Town Utilage CO((CIV D UVC)	13/29/11
5. Bril RANDIAM	1524 Flie St	Town Utilage City City City City City City City City	, 3/29/11
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Levis war of Survey Such	3340 Centestay Ct	□ Town □ Village □ City	3/29/11
10. Berry waxsh	NSSI Red Tail Lane	D Town D Village +) PPIE (CM	3/29/11
	Certification of Circulate	or	-
I, Debra RAZO	ame of circulator)	, cert	ify:
I reside at 1500 Witte Rd. =	+12 Houston, TX. 7708 Ilator's residence - include number, street, and municipality)	0	
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.	s petition. I know that each person signed the p	paper with full knowledge of its conten	nt on the date indicated
3-29-11	_ Debra T	Signature of circulator)	
(date) GAB-170 (Rev.6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, I 608-266-8005, http://gab.wi.gov email: gab@wi.gov	y §§. 8.40 and 9.10, Wis. Stats.	Page	No. 1958

TO: WISCONSIN GOVERNO	MENT ACCOUNTABILITY The first a with whom nomination papers or declaration of candid	BOARD	
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE		Τ
petition for the recall of DAVE HANSE	~ ·	· · · · · · · · · · · · · · · · · · ·	from office pursuant
to Article XIII, Section 12 of the Wisconsin Co		utes.	
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	STATEMENT OF REASON FOR RI city, village, town, and school district officials. I to initiate the recall of state, congressional, leg	The reason must be related to the o	fficial responsibilities of ds.)
	C PURPOSES, WHEN DIFFERENT THAN MUN F THE MUNICIPALITY OF RESIDENCE MUST		NOT SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	OLO) ID IO
1. 0	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
" (A) X/	GREEN BOX WY	O'City / Cell Da	1 4 2/1/
2. Operorg por	1013 NICLOTA	Town Dyllage D	9/3/11
3. Miles P. King	1324 Concord way	Grown Breida W UVillage UCity	I 4/13/11
4. Cassed. King	Merda Wi	Town Dreida WU	4-13-11
5. Keith Strauther)	areen Ban	Town G B Graffy	4/13/1
6. Reve Ripka	1434 Adrhined Cot	Town Village City	4/13/11
7. Lisa Ledvina	1367 W Mason	Town GB	4/13-11
8. Thera Section	138 Schoen	Town Village	4.1311
9. Ed Robetha	232 DELECTS St.	Town Ovillage	4-13.11
10. Styl / 4.1	487 Dousmanst	Town Village	4-13-11
Mathen Red	Certification of Circulato	r	
I reside at 10 9 10 25 4	Jenuer Colprad	0,90019	ertify:
(circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective resi §.12.13(3)(a), Wis. Stats.	petition. I know that each person signed the pedences given. I support this revall petition. Vari	aper with full knowledge of its con a aware that falsifying this certificat	ntent on the date indicated
GAB-170 (Rev.6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, P 608-266-8005, http://gab.wi.gov_email: gab@wi.gov	§§. 8.40 and 9.10, Wis. Stats.	gnature of circulator) Pag	ge No. 1959

TO: <u>Wisconsin</u> Governm	IENT ACCOUNTABILITY (ficial with whom nomination papers or declaration of candid	BCARD acy for the office is filed)	
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE	SENATE DISTRICT or district of officeholder)	,
petition for the recall of DAVE HANSE	(name of officeholder 10 be recalled and office)	ENATE OF WI from	office pursuant
	STATEMENT OF REASON FOR RI		
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required.	city, village, town, and school district officials.	The reason must be related to the official	responsibilities of
			
	S PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		UFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Ciste	3313 Wiggins him	O Town O Village Grez, Bry	5/36/2011
2. pm	7714 Schueff CY.	O Town O Village CARRY AUCT	7/12/20
3. Harmy Ljullius	3364 Schnele, Coti	Drown Over Boy	3/30/291
4. Juda Harm	3348 Unfest ct	Town Village Green Bay	3/30/11
5. April 5 celes	3348 Lenfester, Ch.	Town Orillage Green Bury	3/36/11
6. Muca Delleman	33517 le-fister A	Drown Drillage Collect Baiz	3/37/11
2. Jungler Fly	364 Schwerzer (1	o Village Gran Buy	3/30/11
8. Type Fins	3312 DOUNHUM Cot	Drown Drillage Graen Boy	3/30/11
9. Jan Joupeni	Green boy WI	Town Green Bay,	3/30/11
10. BOWN	3500 Willer Way	Town Village OVER But	3/3/11
1 Dehra Razza	Certification of Circulate	or , certify	
I reside at <u>1500 Witte</u> R	ame of circulator) g. #-12 Hougston, TX.	7703C	·
(circi	ulator's residence - include number, street, and municipality)		
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.	s petition. I know that each person signed the p	aper with full knowledge of its content o	n the date indicated
3-30-11 (date)		ignature of circulator)	
(auto)	(5)	Summer of curentary)	

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TO: WISCONSIN GOVERNM	MECALL PETITION MENT_ ACCOUNTABILITY	BOARD	
We, the undersigned qualified electors of the _		SENATE DISTRI	<u>ct</u> ,
petition for the recall of DAVE HANSE	· ·	r district of officeholder) ENATE OF W I	from office pursuant
to Article XIII, Section 12 of the Wisconsin Co	(name of officeholder to be recalled and office)		•
·	STATEMENT OF REASON FOR RI		
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required			
THE MUNICIPAL VITA LORD FOR MALL IN	Chindren and Mark District and Mark	romal ray of Beginshop I	e NOT SUFFICIENT
	g purposes, when different than mun f the municipality of residence must		S NOT SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDE Indicate Town, City, or Villa	arov mag
1.	1671 1Ch wood G	Town Orllage Green Bo	1 2 / - /
- Mary	apt H Green Ga WI SHE	SI_City	7 1/13/11
2. Outer V Miller	24/1 OALWOOD P	D Village Z.	4/13/11
3. Lichard Mars	2419 OATWOOD #	U Town U Village	4/3/11
4. Pat Gracyalny	3647 Austrian Ln	Town Willage Shamice	5 4/13/11
5. Meganne maus	2419 Oakwood Drive	Town Village GILLEN Ba	4/13/11
6 Chart Hans	906 Birdharan St Harma WI 54201	Town Village	4/13/11
hishos suice	123° Church St Algomer INT 54201	□ Town □ Vallage □ City	Co. 4/13/11
8- TOALV Clant	6661/201010	Town D	4/3/11
angle Colomb	1316 smith	Town Village	4/13/11
10. Jamie Pasina	1226 16th St	O'City	4/13/11
I Mh. Asher, Bochto	Certification of Circulato	r	, certify:
I reside at 90 taltah	ante of circulator) Alator's residence - include number, street, and municipality	3016	
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.	nally obtained each of the signatures on this pars	aper with full knowledge of its	content on the date indicated
(date)		gnature of circulator	
GAB-170 (Rev.6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, E 608-266-8005, http://gab.wi.gov email: gab@wi.gov		1	Page No. 1961

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY ficial with whom nomination papers or declaration of candid	BOARD lacy for the office is filed)	
We, the undersigned qualified electors of the _		SENATE DISTRICT or district of officeholder)	
petition for the recall of DAVE HANSE	N, 30TH DISTRICT STATE S	•	office pursuant
to Article XIII, Section 12 of the Wisconsin Co	(name of officeholder to be recalled and office) Institution and §.9.10 of the Wisconsin State	utes.	
s	TATEMENT OF REASON FOR RI	ECALL	
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	city, village, town, and school district officials. to initiate the recall of state, congressional, leg	The reason must be related to the official distative, judicial, or county officials.)	responsibilities of
	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		UFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF SIGNING
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"Koper Tweps II	2976 STANDINGSON	O'Village Wall Day	4/1311
2. Albert Jandroals	47 Rutger 30	DYCity	4/13/11
3. Days 17 Malana		D Town	4/214
4 0 2 2 -	1014 Strovet St	Town	/////
"The Vers	Green Bay WI 54301	No Village GB	4-13-11
5. Surled Jees	Logo Those and	D Town D Village GCity	4-13-11
6. Und Hardy	1420 Beinhand	U Town U Village Q-City	41311
7. ()	111206-1055710-	Town	11/0/11
8. / Texas	1865 Rowe in	□ Town	7// 7//
Store Lepp	GREEN Bay WI 54303	st City 6B	4/13/11
9. Melissa Lepp	1865 Rowe Un	□ Town □ Village ©FCity & B	4/13/11
10. Jamant Roky Vy	904 13th Ave ApH	□ Town □ Milage	4/3/11
PMillip Pociopa	Sertification of Circulato	A City	10111
1, Halther Bruho	me of circulator)		:
I reside at 90 3 Ralamak	M. VCT Colorado St ator's residence - include number, street, and municipality)	57.19	
I personally circulated this recall petition and personal	ally obtained each of the signatures on this pap	er. I know that the signers are electors of	of the jurisdiction or
district represented by the officeholder named in this opposite his or her name. I know their respective resid	petition. I know that each person signed the pa	aper with full knowledge of its content of	n the date indicated
§.12.13(3)(a), Wis. Stats.	Mart	A	-
(date)		gnature of circulator)	
GAB-170 (Rev.6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, P. 608-266-8005, http://gab.wi.gov email: gab@wi.gov	§§. 8.40 and 9.10, Wis. Stats. D. Box 7984, Madison, WI 53707-7984	Page No.	1962

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY icial with whom nomination papers or declaration of candida	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE (jurisdiction o	SENATE DISTRICT r district of officeholder)	,
petition for the recall of <u>DAVE HANSE</u>	(name of officeholder to be recalled and office)	ENATE OF WI from	office pursuant
to Article XIII, Section 12 of the Wisconsin Con	nstitution and §.9.10 of the Wisconsin State	ites.	
	TATEMENT OF REASON FOR RE		
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	city, village, town, and school district officials. It to initiate the recall of state, congressional, leg	The reason must be related to the official t islative, iudicial, or county officials.)	responsibilities of
N .	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		JFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
1. duicey Encory	3316 Walter Way	Drown Drillage Green Barl	3/30/11
1. Muchy Encary	3312 Walter Way	D.T	3/30/11
3. Knoto (Plus	3321 Lean Book Dr 60 WI 54911 DA	D Town U Village Green Bry Di City	3-30-16
4 0	3334 Walter Way	□ Town	0/0
Dutt Paink	68, WI 54311	Ser City Green Brug	3130111
5. Janay Moore	3314 walter way 68, wt 5431,	Drown Drown Bay	7/30/11
6. At V May water	eas	☐ Town	
was tunderly		☐ City	
2 Stephanie Kopp	3306 Thompson Ct	O Town O Village C1(een Bay	3/30/11
8. Erun Cox	2974 Ted lenfestey Ct.	O Village Green Bay	3/30/11
9. Min Dans	3312 Watter octoy	Town CARCA Bay	3/50///
10. Des St.	33X Cowaltonica	Town Utilage Concellex	3/2/11
	G ((C) 1)		
I, Debra RAZO	Certification of Circulate	or , certify	:
I reside at 1500 Witte	une of circulator) ASI. # 12 HOUSTON lator's residence - include number, street, and municipality)	TX 77080	
I personally circulated this recall petition and person	ally obtained each of the signatures on this par	per. I know that the signers are electors of	of the jurisdiction or
district represented by the officeholder named in this opposite his or her name. I know their respective resi §.12.13(3)(a), Wis. Stats.	petition. I know that each person signed the p	paper with full knowledge of its content of	on the date indicated
<u>3-30-11</u>	Alalla a	Los	
(date)		signature of circulator)	·

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats. This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8005, http://gab.wi.gov email: gab@wi.gov

TO: WISCONSIN GOVERNM	Ficial with whom nomination papers or declaration of candid	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE	SENATE DISTRICT r district of officeholder)	
petition for the recall of DAVE HANSE	(name of officeholder to be recalled and office)	ENATE OF WIf	om office pursuant
to Article XIII, Section 12 of the Wisconsin Co			
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	STATEMENT OF REASON FOR RE city, village, town, and school district officials. I to initiate the recall of state, congressional, leg	The reason must be related to the offic	ial responsibilities of
	FURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		T SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Leanune Hammes	928 Gallagher St Green Bay WI 54303	or Town Orcan Bay	4-13-11
2. Harflynd	3001 CREEKWOOD PR GREENBAY WE 54311	o Town Gity Bellevue	4-13-11
3.10. Ine Red Blan	522N Mych AME OB	D Town U Killage City	4-15-11
4. Adam C. Weller	2711 Hamboldt rd.	O Town Oreen Bay	4-13-11
5. SOSE GONZAZES	1149 ESTATMAN NVE	O Town O Village GREEN SDY	4-13-11
6. And Conant	948 Holzer St	O'TOWN CICLLY BCM	4-13-11
1. Thursen Start	JUSON JAND	O Town Unlage Delity	4/131/
8	17208/120bolist -	Town Gilen Bay	4-13-11
Elika Benjon	1300 DALL ,1	Town 68,	4/13/13
10. Shicky Bratton	1300 DAY ST	Town Utilage City C R	-\$13/W
I Matthew 1	Certification of Circulate		tify:
I reside at 109 Rallan	ulator's residence - include number, street, and municipality)	0,900/9	<u> </u>
I personally circulated this recall petition and person district represented by the officeholder named in thi opposite his or her name. I know their respective res §.12.13(3)(a) Wis. Stats.	nally obtained each of the signatures on this pays petition. I know that each person signed the pidences given. I support this recall petition. I are	paper with full knowledge of its contents on aware that falsifying this certification	nt on the date indicated
(dite) GAB-170 (Rev.6/2007) The information on this form is required to This form is prescribed by the Government Accountability Board, 608-266-8005, http://gab.wi.gov email: gab@wi.gov	y §§. 8.40 and 9.10, Wis. Stats.	Page	No. 1964

from office pursuant

TO: WISCONSIN GOVERNMENT ACCOUNTABILITY BOARD (official with whom nomination papers or declaration of candidacy for the office is filed)

petition for the recall of <u>DAVE HANSEN</u>, <u>30TH DISTRICT STATE SENATE OF WI</u>

(name of officeholder to be recalled and office)

We, the undersigned qualified electors of the 30TH WISCONSIN STATE SENATE DISTRICT (jurisdiction or district of officeholder)

(The reason for recall must be stated on petitions for	STATEMENT OF REASON FOR RI city, village, town, and school district officials.	ECALL The reason must be related to the offici	al responsibilities of
the officeholder. No statement of reason is required	to initiate the recall of state, congressional, leg	rislative, judicial, or county officials.)	
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	G PURPOSES, WHEN DIFFERENT THAN MUN F THE MUNICIPALITY OF RESIDENCE MUST		SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF SIGNING
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1. Chalelly and y	Green Bay, WI-54302	Ovillage Green BAY	3/2(-11
2. Keliy Biaha	SSC MID . C.1	Drown Utillage C, Zen Say	3-24-11
3. Server Sutto	1457 Eastman Ave	Drown O'Village GIRRIN BEY	3/30/201
4. 1 JC 22 Ablac	DS 33HVD WANTON	Town Utilage City CELA	3-35-24
5. (ili Staniel	Shenciago Street	D Town O Village Sheb. Fall's	3-30-11
6. Mento Tritano	1458 Lenfestey Cous	Town Oak	3-30-11
7. 6	3342 Lenfester Curt	1 □ Yillage \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	3-3011
8.	243 SHOKEX CONF	Tu vinage (,)	3/30/11
W Jun	GISEN WIN ME	arcity 1	7/ 3 1(
9. Lasilte	Green Band Drue Green Bay of 54311	□ Town □ Village ☑ City	3/30/11
10. German Michaelson	3242 Lenfestry Caust	U Town U Village V City	3/30/11
	Certification of Circulate		
I, Debra FAZD	name of circulator)	, cert	ify:
I reside at 1500 Witte	P. # 12 Houston ulator's residence - include number, street, and municipality)	,TX. 77080	
I personally circulated this recall petition and person district represented by the officeholder named in thi opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.	s petition. I know that each person signed the p	paper with full knowledge of its conten	t on the date indicate
3-30-11	Delen	-Reso	
(date)	·	signature of circulator)	
GAB-170 (Rev 6/2007) The information on this form is required to This form is prescribed by the Government Accountability Board, a 608-266-8005, http://gab.wi.gov email: gab@wi.gov		Page N	°· 1965

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY ficial with whom nomination papers or declaration of candida	BOARD cy for the office is filed)	
We, the undersigned qualified electors of the	30TH WISCONSIN STATE	SENATE DISTRICT district of officeholder)	
petition for the recall of <u>DAVE HANSE</u>			office pursuant
o Article XIII, Section 12 of the Wisconsin Co.		ntes.	
S The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	TATEMENT OF REASON FOR RE city, village, town, and school district officials. I to initiate the recall of state, congressional, leg-	The reason must be related to the official	responsibilities of
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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF SIGNING
1.///////	Rural address must also include box or fire no.	Indicate Town, City, or Village Town Village OF SON DAY	28/mar 4201
2. Cathy Howchet.	115 Gray St Granday, WI 54303	D Town D Village Society D Central	38/war/5011
3. / my sur Santen	2033 Ferri Cone Green Ban 1,54312	O Town O Village Recy Bay	23/max /201
4. Deme Wentrouth	arse Comman Wi 54311	O Town O Village C. New Bary	28/mc//2011
5. Jyler Draves	Apt. 9 Green By WI	U Town U Village St City	728/11
6. Michael J Johnsonok	6 reen by wt	O Town O Village O Lown	3/26/11
7. Jami helds.	(5B. Wi. 54302	D Village OB	3/22/1/
8. Francisco M.	910 Abrems of 4132	U Village	3/20(11
9. Kynn Langer	DEPERE 45 54115	O Town	3/25/11
10. Lighal Seeg	6 rown boy	Village ()	1/28/11
, Nathrew Bc	Certification of Circulate	O r	fy:
Treside at 909 Kolizah	name of circulator) WN VE C C LOCC utalor's residence - include number, street, and municipality)	do 80219	
I personally circulated this recall petition and perso district represented by the officeholder named in thi opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.	is netition. I know that each person signed the t	paper with full knowledge of its content	on the date indicated
(date)		signature of eirculator)	

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TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY ficial with whom nomination papers or declaration of candid		
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE	SENATE DISTRICT or district of officeholder)	
petition for the recall of DAVE HANSE	N , 30 TH DISTRICT STATE S	ENATE OF WI from	office pursuant
to Article XIII, Section 12 of the Wisconsin Co	nstitution and §.9.10 of the Wisconsin Stat	utes.	
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required		The reason must be related to the official	responsibilities of
	· <u>w</u> ,		
	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		UFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
· Kelly Knigon	3348 10e (1/1/11/11/11/11/11/11/11/11/11/11/11/11	Distroya Divilage City Green BAY	3/30/11
2. For Clement	3326 Walterwy	O Town O Village O City O CEN Bay	313011
3. Seather & Believes	Bay WI 54311	U Town U Village V City V Cran Bou	3/30/11
1. Notice Gewer	3312 Walter Wry	OVIllage Green Bay	3/30/11
5. Paul Gurnson	3356 Walter Way	United Con Base	3/30/11
6. John Tall	3342 Legleff (+	O Town O Village Scity O SREET POLY	3/30/11
Jachany & holder	3342 sentisting Ct	O Town O Village O City O City	3/30/11
8. Sen Moor	Storgeon Bay 54235	O Town O Village Percity Stronger Arcity O Town	3/30/1
9. Kelly Cilfaur	Green Bay, WI	Unitage Green Bay	3/36/11
10. Jose Sinjon	GreenBay Wi SUSSY311	U Village ()	3/30/11
1. Debra RAZO	Certification of Circulate) [, certify	<i>r</i> :
I reside at 1500 Witte	me of circulator) Red. #12 Houston, lator's residence - include number, street, and municipality)	Tt. 77080	
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective resi §.12.13(3)(a), Wis. Stats.	petition. I know that each person signed the p	aper with full knowledge of its content of	on the date indicated
(date)	(s	ignature of Greulator)	

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.

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608-266-8005, http://gab.wi.gov email: gab@wi.gov

Page No. \967

TO: WISCONSIN GOVERNM	IENT ACCOUNTABILITY Micial with whom nomination papers or declaration of candid	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE	SENATE DISTRICT or district of officeholder)	
petition for the recall of DAVE HANSE			om office pursuant
to Article XIII, Section 12 of the Wisconsin Co	·		
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required		The reason must be related to the offi	
	PURPOSES, WHEN DIFFERENT THAN MUN		T SUFFICIENT.
signatures of electors	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Jan M Coust	SUITE 420	D Town O Village GREEN BO)	r APRI
2. Palle Jamper	3096 FALCON PIDEF TRL	D Town St Village SUH MICS	4/1/11
3.	SGY E Massey	□ Town	4/11/1
4. Bob Morton	JUTY Cty 3 Jettle Sucurio	Town Jettle Sucum	de 4/-1-11
5 Zu Z Malt	6 Mary band Br Green Bay WI 543/3	D Town D Village D City Town	04/04/11
(6) udy Mark	1385 Davis Dr. Green Bay, W.J	1 Town Dreen Bay	04-0211
Rober Macke	Dreen Bay WE	o Town or Village neen Bou	104-0241
Dato to Cornier	Green Key, Wi	Drown Dr	4-2-11
9. Mar	MITHITY OCONTOFIL	DXTown UVillage 51, KT	4/2/11
10. Walten & Trenge	1524 Orchiden	D Town D Village Ashivouberron City	4/2/11
I Nichalas Sma	Certification of Circulate		tify:
I reside at 32 S. Wa	some of circulator) Sha abn & Aph lator's residence - include number, street, and municipality)	218 Bb	
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective resi §.12.13(3)(a), Wis. Stats.	petition. I know that each person signed the p dences given. I support this recall potition. I an	aper with full knowledge of its content aware that falsifying this certification	nt on the date indicated
(date) GAB-170 (Rev.6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, P 608-266-8005, http://gab.wi.gov email: gab@wi.gov	§§. 8.40 and 9.10, Wis. Stats.	gnature of circulator) Page	No. 1968

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY ficial with whom nomination papers or declaration of candida	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the	30TH WISCONSIN STATE	SENATE DISTRICT r district of officeholder)	,
petition for the recall of <u>DAVE</u> HANSE	9		n office pursuant
to Article XIII, Section 12 of the Wisconsin Con		ites. ',	
	TATEMENT OF REASON FOR RE		ltilida af
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	city, village, town, and school district officials. I to initiate the recall of state, congressional, leg	ne reason must be retatea to the officials.) islative, judicial, or county officials.)	i responsionines oj
THE MUNICIPALITY USED FOR MAILING THE NAME OF	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST	ICIPALITY OF RESIDENCE, IS NOT ALWAYS BE LISTED.	SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1.	1076 Shynin	☐ Town 12 Village (2)	13/11/11
1 SeMinmil	1630 Tinke /w.	a City Della D	3/01/11
2. Chris Cudnosti	54304	or Vilage Ven Bay	3-27-11
3. Co. Carlyh	32 Covon BAU WL	Drown Driffage Drown	3-28-11
4. 0 1	1425 Wester Ave apt9	C Town C Village ()	
Ca Bhanced fruit	Cheinbry WI	proity Onengay	3/28/1
5. Duniese 9 South Br	CB. WI	Willage Creensay	5-28-11
6.	400 N. Monroe	☐ Town ☐ Village	2 × 10 11
Find incent	2717 fellight	Town - Day	J 2871
1 linth Juil	Creen Bay Wi	Prilage Grity Bay	3-25-1
200 atomik	Green Bay	Town DCU	3-2811
1 KONTHEDUR	1195 W' NA SCASO	□ Town	
Pranto Tores		Dr. City BOU	3.7811
10. Marfie	At Marcy Time	Jown Styllage A City	328-11
Mills	(Certification of Circulate	or, certi	6
1, WATNEW TONG	ame of circulator)		ıy.
I reside at 40 Rallegh force	ulator's residence - include number, street, and municipality)	<u>8007</u>	·
I personally circulated this recall petition and person	nally obtained each of the signatures on this pa	per, I know that the signers are elector	s of the jurisdiction or
district represented by the officeholder named in this opposite his or her name. I know their respective res	s petition. I know that each person signed the pidences given. I support this recall petition. I at	paper with full knowledge of its content in aware that falsifying this certification	is punishable under
§.12.13(3)(a), Wis. Stats.	N//s=1.1		
(date)		signature of circulator)	
GAB-170 (Rev.6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, 608-266-8005, https://gab.wi.gov email: gab@wi.gov	oy §§. 8.40 and 9.10, Wis. Stats. P.O. Box 7984, Madison, WI 53707-7984	Page 1	1969

i

We, the undersigned qualified electors of the 30 TH WISCONSIN STATE SENATE DISTRICT [jurisdiction or district of officeholder) petition for the recall of DAVE HANSEN, 30 TH DISTRICT STATE SENATE OF WI from office put [name of officeholder to be recalled and office) to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.	, rsuant		
(name of officeholder to be recalled and office)	rsuant		
to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.			
STATEMENT OF REASON FOR RECALL (The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsible the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)	lities of		
THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIEN THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.	T.		
SIGNATURES OF ELECTORS STREET & NUMBER OR RURAL ROUTE MUNICIPALITY OF RESIDENCE DATE	E OF VING		
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1. North Bleyke Prof BENT WOOD ON Green bay 1/1	111		
2. Cherle Al 1507 Beech Tree O Town Village Green Bay 4/1	7/11		
3. Spellon Bus 4/	1711		
4. Zach Haneman 1742 W. Mason Town Wilage Green Bay 4/1	7/17		
5. With Sul 1308 5 Taylor 54 1 Town Village GB 4.17.	-17		
6. Jason Muelles 1308 5 Taylorst# 5 10 Town Village Ocity (-18)	7-11		
7. 2000 1318 5 TAYLOR APT City 75 4-1	7-11		
8. In Jofeller 1318 5 Taylor Apt 3 1 Town Willage GB 4-	17-11		
There O, Will 1818 STAYlorST AV, 2 O Town O Village OB 4-1	フーリ		
10. Som Asia to Tunylor St City (B)	7//		
Certification of Circulator			
(name of circulator)			
I reside at 1065 - S Ames 5 take wood Colorado - 8027 6 (circulator's residence - include number, street, and municipality)	<u>;</u>		
I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under			
§.12.13(3)(a), Wis. Stats.	<u> </u>		
4-17-1/ Kachen St Wallact (Signature of circulator)			

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	RECALLIFICATION	2 4 4 4 1	
TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY I cicial with whom nomination papers or declaration of candida	SOHKD cy for the office is filed)	
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE		
petition for the recall of DAVE HANSE	(pame of officeholder to be recalled and office)	ENATE OF WI from	office pursuant
to Article XIII, Section 12 of the Wisconsin Con	•	ntes.	
	TATEMENT OF REASON FOR RE		
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required.	city, village, town, and school district officials. I	The reason must be related to the official i	responsibilities of
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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF SIGNING
	Rural address must also include box or fire no.	Indicate Town, City, or Village	
"Ralph David_	805 meacham 38	MCity Green Day	4-07-11
2. Jather Ward	805 Meachen st	Town U Village GWGiby	4.17.11
Constance	524 mercham	CD Town D Village CCity	4-17-11
4. Sant Long	G25 MEACHAM	Town Urillage	4/17/11
5. Inth	118 N. ONTEDA 57.	Town Utiliage ACtity	417/11
6. Tour o men	154 Landas	Town Village & B	Y/7/1
7. 9	1535 longade	D Town O Village SVCity	4/17/11
8.	1308 Staylor 4	O Town	4/11/0
2.	1308 Staylor	D Town	4/12/11
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in the state of th		6 CHÝ D	(/(///
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1, Richard A Mad	rilland	, certif	-
I reside at 1065 S Ances	ulator's residence - include number, street, and municipality)	orado 8022	<u>, 6</u>
I personally circulated this recall petition and person district represented by the officeholder named in thi	s netition. I know that each person signed the i	paper with full knowledge of its content	on the date molcated
opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.	sidences given. I support this recall petition. I a	m aware that laksifying this certification i	s punishable under
4-/7- //	_ Ruha	signature of circulator)	<u></u>

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats. This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8005, http://pab.wi.gov email: gab@wi.gov

Page No. |97|

	RECALLIEITION		
TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY ficial with whom nomination papers or declaration of candida	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the	30TH MISCONSIN STATE	SENATE DISTRICT r district of officeholder)	
petition for the recall of <u>DAVE HANSE</u>			office pursuant
to Article XIII, Section 12 of the Wisconsin Co	· ·	ites.	
	TATEMENT OF REASON FOR RE		
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	city, village, town, and school district officials. I	The reason must be related to the official	responsibilities of
			
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Signature and the same of the	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
1 Jan Aharlo	Grenbal	O Town O Village Gror, 15al	3/28/11
2. MARIA CISHEROS	Winsor # 2 Geen HA)	O Town O Village CVEEN 13AX	32811
3.	2012 Vine StApt C	D Town D Village D Gity D C 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3-28+1
4.05CAB-ESDARZ	GOOD LEV IMPERIA ST	TOWN E. B. MIN	378/
5.1 Man M 77 2000	DC53 Augustst	Town' Uvildge	3-28-11
6	1456 Gooks at	☐ Town ☐ Village /	3-2811
7. A JAL	1222 Steel 2 5t	O Town	7-20.11
trigel & lumpnes	Algoma 1000	□ City TI(Y) N TA	37011
1/Enrs January Ji	Crey Bay wi 6430	Town	281
Jost Morals	1946 Seulle D. ATHS	Specify G, D/	12.5011
10. Octavi Gun	Green Bc. W. 54301	Delty (- 173	Bleying
1. Matthew Bech	Certification of Circulat	or, certi	fy:
Treside at 905 Rallcah	naure of circulator) Collator's residence - include number, street, and municipality)	odo 20219	
I personally circulated this recall petition and personally circulated this recall petition and personal district represented by the officeholder named in the opposite his or her name. I know their respective re §.12.13(3)(a), Wis. Stats.	onally obtained each of the signatures on this page	aper. I know that the signers are elector paper with full knowledge of its conten	i on the date mulcate
3-78-11	Med		
(date)	, ((signature of circulator)	

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.

This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8005, http://gab.wii.gov email: gab@wi.gov

10: WISCONSIN GOVERNIM	ficial with whom nomination papers or declaration of candid	lacy for the office is filed)	
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE (jurisdiction o	SENATE DISTRICT or district of officeholder)	
petition for the recall of DAVE HANSE	N 30 TH DISTRICT STATE S (name of officeholder 10 be recalled and office)	ENATE OF WI from	office pursuant
to Article XIII, Section 12 of the Wisconsin Co	nstitution and §.9.10 of the Wisconsin Stat	utes.	
	TATEMENT OF REASON FOR RI		
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	city, village, town, and school district officials to initiate the recall of state, congressional, leg	The reason must be related to the official sistative, judicial, or county officials.)	responsibilities of
			
	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUS		UFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF SIGNING
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1. Lever Of lev	1324 Taylors +6	O Town O Village Green Bay Dicity	4-17-4
2/Charlel My my	1324 5 TAYLOR ST #7	Town SEGN PAY	4121
3.	1728 TAY 10 3+ 49	□ Town □ Village	4 111
Jan 2	72 12 H. 114 St AO2 11	Town	
1. J / h 5 mad	15 78 17 Pro 2 184,	City Cour Bank	472 (1
5. Ed. A Cacc	1595 Staylo(38)	Town Village City	4-17-16
6. P.M. Taya	14350 Taylorstz	Town O Village Or City	4-17-10
7. (1. 1)	1436 Taylor+2	□ Town □ Village	4/17/1
Co O O O O O O O O O O O O O O O O O O O		Oxicity / S	1/////
8. Lotaie & Lleard	1431 S tay 10rta	Village G B	17-11
9. Hya Shuri	1431 5. Tay be #2	Town Village G G	4-67-1
10. Melinge lenge	1431 S. Paulor St #2	O Town O Village G B	4-17-11
Richard A Madrill	Eertification of Circulate		
I, A Charo fi // Copi (l	ame of circulator)	, certif	y:
I reside at 10 ce 5 5 Figure Q	3 5 Lake wood ulator's residence - include number, street, and municipality)	Colorado 80	· 055(
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.	s petition. I know that each person signed the	paper with full knowledge of its content	on the date indicated
(date)		(signature of circulator)	~~~
GAB-170 (Rev.6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, I 608-266-8005, http://gab.wi.gov_ernail: gab@wi.gov	oy §§. 8.40 and 9.10, Wis. Stats. P.O. Box 7984, Madison, WI 53707-7984	Page No.	. 1973

	RECALLIETTION		
O: WISCONSIN GOVERNO	MENT ACCOUNTABILITY official with whom nomination papers or declaration of candid	BOARD acy for the office is filed)	
Ve, the undersigned qualified electors of the	30TH WISCONSIN STATE		
etition for the recall of <u>DAVE HANS</u>	EN 30TH DISTRICT STATE S (name of officeholder to be recalled and office)		office pursuant
Article XIII, Section 12 of the Wisconsin C	Constitution and §.9.10 of the Wisconsin State	utes.	
	STATEMENT OF REASON FOR RI		
The reason for recall must be stated on petitions fo he officeholder. No statement of reason is require	or city, village, town, and school district officials. I In the initiate the recall of state, congressional, leg	The reason must be related to the officia islative, judicial, or county officials.)	l responsibilities of
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	IG PURPOSES, WHEN DIFFERENT THAN MUN OF THE MUNICIPALITY OF RESIDENCE MUST		SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
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1. //2	Harrow H. 3364 Sheretter (our	Drown Green Bay Droity	3-29-11
2	Con Sinal str St. Gener Burn	☐ Town	1
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3. Kisk Solman	1500Tranpsn Ct	Town UVillage GB	3/29/11
4.	(12) 5 (21)	O Town	
		□ City	
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Debra PAZO	Certification of Circulate	, certi	fy:
15:5 15:11	(name of circulator)	X.7708D	
reside at 1500 Witte	rculator's residence - include number, street, and municipality)	1. 11000	
personally circulated this recall petition and pers	conally obtained each of the signatures on this pa	per. I know that the signers are electors	s of the jurisdiction
listrict represented by the officeholder named in the	his petition. I know that each person signed the p	paper with full knowledge of its content	t on the date indicate
opposite his or her name. I know their respective respe	esidences given. I support this recall petition. I al	m aware toat raisnying ims certification	is banishanie auder
3-29-11	100km	e los	
		signature of circulator	

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats. This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8005, http://gab.wi.gov email: gab@wi.gov

TO: WISCONSIN GOVERNIM	IENT ACCOUNTABILITY Clicial with whom nomination papers or declaration of candid-		
We, the undersigned qualified electors of the			
	(jurisdiction o	r district of officeholder)	
petition for the recall of DAVE HANSE	(name of officeholder to be recalled and office)	ENATE OF WIfrom	office pursuant
to Article XIII, Section 12 of the Wisconsin Co	•	utes.	
S	STATEMENT OF REASON FOR RE	ECALL	
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required			responsibilities of
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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF SIGNING
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2. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1544 Belle Holan	□ Town ☑ Village(2/2/11
Japle Com	12575 Fre 1543/7	Town	3/29/91
3 Mary Stredtke	Green 12 (1154303)	D Village (Tet) Bro	3/39/11
4. 7	493/ EDGE Water Brace	SKTOWN CIKEE/1 BCey	9/90/11
sear nguyen	Rel	D'City -	7/21/11
5. fatti Ngayen	//	□ Town □ Village ∕ □ City	11
Bershill series	1) 2010 11 (2010) (2011)	D-Town D VIII BOY WENT OF THE PROPERTY OF THE	3-29-11
7. Jis wa Harrik	Sout Brief RL	th Town	3-29-11
8.	Director do la D	City SZ Town	
Con Con Con	Gren Rom W	o city Chenban	3-21-11
	2/22	□ Town	_//
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I reside at 16 halles he lecirco	NVC (o) (o) (act o) (d) (alternative residence - include number, street, and municipality))47	,
I personally circulated this recall petition and person	nally obtained each of the signatures on this par	per. I know that the signers are electors	of the jurisdiction o
district represented by the officeholder named in this opposite his or her name. I know their respective res			
, §.12.13(3)(a), Wis. Stats.		MALTA	
3-Z9-11		1/1/1/7-44 \ 2/3/	
(date)		ignature of circulator)	

TO: WISCONSIN GOVERNM	EINT ACCOUNTABILITY ficial with whom nomination papers or declaration of candida	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the	30TH WISCONSIN STATE	SENATE DISTRICT	,
petition for the recall of <u>DAVE HANSE</u>	Ť	•	office pursuant
to Article XIII, Section 12 of the Wisconsin Co	nstitution and §.9.10 of the Wisconsin State	utes.	
S (The reason for recall must be stated on petitions for the officeholder. No statement of reason is required		The reason must be related to the official i	responsibilities of
	PURPOSES, WHEN DIFFERENT THAN MUNTHE MUNICIPALITY OF RESIDENCE MUST		UFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
1. Emore Williams	1199 (o/mier RI)	Oron Green Bight	3-27-11
2. Ortun Conillatal	11He Sumero	o Town SVillage IIHIE Sumeio	3-27-11
3. N/c/ Lu 1/2/	707 Biend Way	□ Town □ Village	3.27-1
4.	1767 Strawnicy Law.	□ Town □ Village ← 1 C □ D	3-7-7-11
Damien Neck	Octor Bay	XCity (1)	-3 -7 11
Larry Valend	1413 NOKWOSD	O Village BREEN BAY	3-27-11
6. Annual Berry	GrenBull	Down Dillage Dicity	3-27-11
2 Lesy Clarke	1434 Clark	O Town O Village () (O Cu)	3.771
8. / 21/	1005 5 Military	O Town	3-21-11
a de la la constantina de la constantina della c	2419 Oakyon Or	Town ,	2-21-11
" my Vlug	Grein Bay UVA	the City Green Bay	5-2-7-11
10. Amna Vana	irun Ban WI	O Town O Village (VV CM) FAM City	3-27-11
Moules (1) Beat	Certification of Circulate		
()()	ame of sirculator)	, certify	·:
I reside at \(\lambda \	lator's residence - include number, street, and municipality)	10 2 80 ()	
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective resi	petition. I know that each person signed the p	paper with full knowledge of its content of	on the date indicated
§.12.13(3)(a), Wis. Stats.	1	March A	
(date)	(s	ignature of circulator)	· .

GAB-170 (Rev. 6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats. This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8005, http://gab.wi.gov email: gab@wi.gov

TO: WISCONSIN GOVERNM	EINT ACCOUNTABILITY ficial with whom nomination papers or declaration of candida	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the	30TH WISCONSIN STATE	SENATE DISTRI	CT
petition for the recall of <u>DAVE HANSE</u>	N, 30TH DISTRICT STATE S	•	from office pursuant
to Article XIII, Section 12 of the Wisconsin Co	(name of officeholder to be recalled and office) nstitution and §.9.10 of the Wisconsin State	utes.	
	TATEMENT OF REASON FOR RE		m c t utura c
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	city, village, town, and school district officials. I to initiate the recall of state, congressional, leg	the reason must be related to the islative, judicial, or county offi	e official responsibilities of cials.)
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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESID: Indicate Town, City, or Vill	CICNIDIC
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17 JULIANUS	3306 Thompson ct.	UVillage (1/22h 1/2	· · · · · · · · · · · · · · · · · · ·
2. Henri John	Green Bry WI S4311	Uvillage G	3/29-1
3. 0 212/1/1	3343 Jea Lenfesky Ct	□ Town □ Village	3/39/11
133400 13000	Green Bry Let S4311	Socity 615	2121
Hallall DLV)	Breen By Misq311	Village Co	3/29/11
5. Casey Macholi	3332 Water Way	Town Village (Areen 3	m 3/29/11
6	3367 Scharafer Ct	□ Town □ Village CayCos □ C	3/2014
7.1	3302 schaffer cl	Town O	' ' '
"Synding Salkon _	oren Ray WI SAZII	Sucity CYCEN K	NU 3/29/11
8. (3. Rg / C.) A-1	13326 WALTER WAY	U Village Coulon 13	Ay 3/29/11
9. Malace 10 de 1903	2 2 16 Phu Moon Dr.	□ Town	2/29/11
10 / D	3453 Lean Bond Pr	Acity GYE en 1	3/29/11
10. Taylor Rosinski	Green Bay WT 54311	Scity Gren B	9 3/2/1
	Certification of Circulate	or	, `
I, Debra RAZO	ame of circulator)		_, certify:
I reside at 1500 builto Concernity	P. #12 HOUSTON, T.K. inlaton's residence - include number, street, and municipality)	77080	·
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.	s petition. I know that each person signed the p	paper with full knowledge of its	s content on the date indicated
3-29-11 (date)	_ Joba i	Signature of circulator)	
GAB-170 (Rev.6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, I 608-266-8005, http://gab.wi.gov email: gab@wi.gov	y §§. 8.40 and 9.10, Wis. Stats.		Page No. 1977

	RECALLIETTION		
TO: <u>WISCONSIN GOVERNM</u>	ENT ACCOUNTABILITY I	SCARD cy for the office is filed)	
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE_ (jurisdiction or	SENATE DISTRICT district of officeholder)	
petition for the recall of <u>DAVE HANSE</u>	(name of officeholder to be recalled and office)	ENATE OF WIfrom	office pursuant
to Article XIII, Section 12 of the Wisconsin Co.	•	ntes.	
	TATEMENT OF REASON FOR RE		
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	city, village, town, and school district officials. I	he reason must be related to the official	responsibilities of
THE MUNICIPALITY USED FOR MAILING	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST	ICIPALITY OF RESIDENCE, IS NOT S	UFFICIENT.
	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
SIGNATURES OF ELECTORS	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
1. Adams	1012 Lina Kiln Rd#8	D Town D Village 1000 A Deity G S a Y	3/28/11
ACILIVV	545 SDIANAKER LIN	□ Town	
2. Daniel Dilun	Green Bay WI	Town	3/28/11
3. Pyla Bannoutre	breen Boy WL	Village (2) (1)	3/34/1
1 John of frimel	1003 Finger RA	O Town U Village Detity	33841
5. // 2	2263 Impuis In	□ Town □ Village © City	3-28-11
6.2 x (PM	2222 MANHOUSE CIL	□ Town □ Village	3-7811
Chy Or Death	5414 Green Way	STCity U(V)	7-2011
Book Vales	Green Bay WI,	O'City Bellevie	2 do 11
8 July Hanhof	(1422 Sterling High	Di Village /) 2 (12 CW	325/1
9. In Palle	1341 SUNAY UN 68 41	Town U Village GB	3-28-11
10. Keng Vara	1579 Footler Drive	Town U Village Parcity	328-11
Marliner Roch	Certification of Circulate	Or, certii	fy:
Treside at 909 Rollogh V	She of circulator) LNULY (Obrado	,80719	
) (cho	culator's residence - include number, street, and inunicipality)		a a e galacter te de se
I personally circulated this recall petition and person district represented by the officeholder named in the opposite his or her name. I know their respective respective respective respective.	is petition. I know that each person signed the	naner with full knowledge of its content	on the date matcate
§.12.13(3)(a), Wis. Stats.	MILLAT	Total .	
(date)	*	(Signature of circulator)	

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.

This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8005, http://gab.wi.gov email: gab@wi.gov

	RECADELETITION	_	
TO: WISCONSIN GOVERNMI	ENT ACCOUNTABILITY I icial with whom nomination papers or declaration of candida	SOARD	
We, the undersigned qualified electors of the	BOTH WISCONSIN STATE	SENATE DISTRICT district of officeholder)	,
petition for the recall of DAVE HANSE	(name of officeholder to be recalled and office)	ENATE OF WI from	office pursuant
to Article XIII, Section 12 of the Wisconsin Cor	•	tes.	
S	TATEMENT OF REASON FOR RE	CALL	
The reason for recall must be stated on petitions for a	city, village, town, and school district officials. T	he reason must be related to the official r	esponsibilities of
the officeholder. No statement of reason is required t	io initiale the recall of state, congressional, legi	stanye, juaiciat, or county officials.)	
THE MUNICIPALITY USED FOR MAILING THE NAME OF	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST	ICIPALITY OF RESIDENCE, IS NOT SU ALWAYS BE LISTED.	JFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
	1720 WESTERN AVE. #18	Usilyage Creek Wy	3-19-11
Josefina Sagredra	GRENBAY WILL SY303	to €itý	
2 L 100	1720 Western AVE 419	Brity Greensey	3-19-11
3 0	1120 1.00	□ Town	52 V
"Hodon 1 brah m	11920 Westerand	Dyllage Greenbay	-5/19/1
4.	1745 Wegan Ave 47	O Village A	3-15-11
Ja NUIF	(LAM24300)	cheity C	1-11 4
5. 1	172 Western	Town Village	3-19-11
Cather Saldana	1777 1200100	a City CC	7 B (
6. Avid Peterson	1776 Western	U Village (Y)	3.17-9
7. 8 1	1772 weslen	□ Town □ Village & //	3-185
Jerog M Bush	ave grenchy	Eleity 0-09	2 10 -(
8. 1 1/2 - ()	1772 besten Alle	D Town D Village D City	3-19-11
2 1 4 0 /	1777 Western Ave	☐ Town	2 2 11
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10.0	11 11 11	Town (A)	3-19-11
Sam Seroimiss		U Village 915	
	Certification of Circulate	or	
1, Richard Madeill		, certify	<i>"</i> :
_ N	ame of circulator) St	A colomba i	30226.
	ulator's residence - include number, street, and municipality)	w coloured -	<u> </u>
I personally circulated this recall petition and person	nally obtained each of the signatures on this pa	per. I know that the signers are electors	of the jurisdiction or
district represented by the officeholder named in this	s petition. I know that each person signed the p	paper with full knowledge of its content of	on the date indicated
opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.	•	or aware that raistrying this certification is	punanaoic under
13-20-11	Richar	It Madil	
(date)		signature of circulator)	

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats. This form is prescribed by the Government Accountability Board, P.O. Box 1984, Madison, WI 53707-7984 608-266-8005, http://gab.wi.gov email: gab@wi.gov

TO: WISCONSIN GOVERNM	IEINT ACCOUNTABILITY Ticial with whom nomination papers or declaration of candid	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE	SENATE DISTRI	CT
petition for the recall of DAVE HANSE	N 30TH DISTRICT STATE S		from office pursuant
to Article XIII, Section 12 of the Wisconsin Co	(name of officeholder to be recalled and office) onstitution and §.9.10 of the Wisconsin Stat	utes.	
	STATEMENT OF REASON FOR RI		
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	city, village, town, and school district officials.	The reason must be related to the	e official responsibilities of
The officentiaer. Two suitement of reason is required	to manue me recun of same, congressioning reg		
THE MUNICIPALITY USED FOR MAILING	F PURPOSES, WHEN DIFFERENT THAN MUN	ICIPALITY OF RESIDENCE,	IS NOT SUFFICIENT.
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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESID	ercymic.
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2. / / 7)	3214 Licolet Drive	D Town D Village (72	/ 3/29/u
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3 Tode W	16) I'M' I'M' I'M'	U Village	5/57 "
4.	3376 Lonfesty (+	Town Uvillage 68	2/19-11
Jon Kongas	Text (1) in sect	City	71 29111
5. Ayun Bayanou	3012 with war	O Village 60	3124111
6. Magar I Bulos	3312 halter way	Town Sylage ()/3	3/2411
V. 1	3524 heterical	Ex City Extreme	7/1/
2 CONNAMED	77) 1 00 11 12 14	Village (S)	15/29/1/
8.60000	3314 WalterWay	□ Town □ Yillage (, \2	12/12/1
	2,00,1111111	Decity U	03/21/1
21) lett our draware	3332 Walter Way	D Town D Village SCity	3/29/11
10.	3301 Thanson CT	□ Town	
Chris gert DUCCOUNT		D Village D City 96	3/2/3/11
	Certification of Circulate	or	
I, Debra Pazo	ame of circulator)		_, certify:
	8. #12 Houston, TK.	77 <i>0</i> 80 -	
			and the control of th
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.	s petition. I know that each person signed the p	paper with full knowledge of its	content on the date indicate
3-29-11	Delic_	laso	
(date)		signature of circulator)	
GAB-170 (Rev.6/2007) The information on this form is required to This form is prescribed by the Government Accountability Board, 1608-266-8005, http://gab.wi.gov email: gab@wi.gov		Ĺ	Page No. 1980

TO: WISCONSIN GOVERNA	MENT ACCOUNTABILITY Official with whom nomination papers or declaration of candi	BOARD	
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE	SENATE DISTRICT or district of officeholder)	·
petition for the recall of DAVE HANSI	•		ı office pursuant
to Article XIII, Section 12 of the Wisconsin C	onstitution and §.9.10 of the Wisconsin Stat		
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required		The reason must be related to the officia	l responsibilities of
_	G PURPOSES, WHEN DIFFERENT THAN MUN	•	SUFFICIENT.
THE NAME O	F THE MUNICIPALITY OF RESIDENCE MUST	Γ ALW <u>A</u> YS BE LI <u>S</u> TED.	1
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Annalisa. Canano Cimeras	52511th Au	Town Colly City	4-811
2. Cher Craicies	83) Richala	Town Village Grity	4/8/11
3. fet pro	CVO Linkle QI	Town Utilage	46/11
Hones Marcal	2/40 trable to	D Town U Village D Towy	4/8//
5.	1257 11 5	O Town U Village	4/8/10
6. Julien Stoly	120) Skyerders	□ Town □ Yillege □ City	4/2-11
7. Des Est	1026 HOLF HIGOD#,	D TOWN HOWARD	48-11
8. Tude Clave	1708 King Arestras	U Town U Village D City	4-8-11
9. July Chone	525 Chicago St	Town Uvilage Of D	46-11.
10. Landin	1201 Chijulio.	D Town	4/8/1
181 B1	Certification of Circulate	or	
I reside at 10 Rayesh 1	arne of circulator) O O T O O T O O T O O T O O	40719 , certif	y:
(circ	ulator's residence - include number, street, and municipality)		- Calla in de West
I personally circulated this recall petition and person district represented by the officeholder named in thi opposite his or her name. I know their respective res §.12,13(3)(a), Wis. Stats.	s petition. I know that each person signed the p	aper with full knowledge of its content	on the date indicated
481		1 the	
(date) GAB-170 (Rev.6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, if 608-266-8005, http://gab.wi.gov email: gab@wi.gov	oy §§, 8.40 and 9.10, Wis. Stats.	Ignature of circulator) Page No	1981

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY Ticial with whom nomination papers or declaration of candid	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the	30TH WISCONSIN STATE	SENATE DISTRICT r district of officeholder)	
petition for the recall of DAVE HANSE	· ·	-	m office pursuant
to Article XIII, Section 12 of the Wisconsin Con	•	utes.	
S' (The reason for recall must be stated on petitions for c	TATEMENT OF REASON FOR RE		al responsibilities of
the officeholder. No statement of reason is required			
	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Brotz Volan	3352 Thompson Ct. Green Bay WF 54311	O Town O Village Fren Gay	3/29/11
2.	Core Big Wf 5722	O Town O Village DiCity Comments O Village	3/24/1
3. Frankriker Durker	3312 Walter Way Creen Bay, WI 34311	o Town O Village Palicity O VILLED DAY	3/201/11
1. Fredrick Makinger	Bythe confession, with the state of the stat	Q Town Q Village Q City (Y Z L) B 19	3/29/11
5. Kyle obassk	3712 Cinfest ct	O Town O yillage Gran Buy Society	3/29/11
6. Seimilme	3797 Wilter Villy	U Town U Village DrCity G	3-29-11
7. MILLIE EILINGSON	3534 Walter Wy	□ Town □ Village ☑ City	3-2011
8. Kuyla Ditter	3314 Walter Wary	U Town U Village Sucity	3/29/11
Willian Kanlon	3334 Walter wy	U Town U Village UCity	3/244
10. Kate Brown	337(p Downham	U Village	3/24/1
I, Debra RAZD	Certification of Circulate) l' , certi	ifv:
I reside at 1500 Witte Ro	me of circulator) 1. # 12 Houston, TX. 7 lator's residence - include number, street, and municipality)		·
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective resis §.12.13(3)(a), Wis. Stats.	ally obtained each of the signatures on this pap petition. I know that each person signed the p dences given. I support this recall petition. I an	aper with full knowledge of its conten a aware that falsifying this certification	t on the date indicated
3-29-11 (date)	Deluc ;	Manalure of Forculator)	
GAB-170 (Rev.6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, P. 608-266-8005, http://gab.wi.gov email: gab@wi.gov		Page N	10. 19BJ

TO: WISCONSIN GOVERNA	MENT ACCOUNTABILITY Official with whom nomination papers or declaration of candid		
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE	SENATE DISTRICT or district of officeholder)	-
petition for the recall of DAVE HANSE	EN, 30TH DISTRICT STATE S		om office pursuant
to Article XIII, Section 12 of the Wisconsin Co	(name of officeholder to be recalled and office) onstitution and §.9.10 of the Wisconsin Stat	utes.	
(The reason for recall must be stated on petitions for	STATEMENT OF REASON FOR RI		
the officeholder. No statement of reason is required	to initiate the recall of state, congressional, leg	ric reason must be retated to the applications, judicials, or county officials.)	aai responsioiiiiies oj
THE MUNICIPALITY USED FOR MAILING	G PURPOSES, WHEN DIFFERENT THAN MUN	ICIPALITY OF RESIDENCE, IS NO	T SUFFICIENT.
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SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include, box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. De Day	1468 by Jenther Way	Town Green	BAY V
2.		City Daniel	9-0-11
Vital Spiersen	409 S. Webs ter Ave.	ocin Grenbay	4-8-11
3. Hulling Km	Storceon Bay, NI 34235	O Town O The Stanger Bay	4-8-11
4. Stewn (0) Lector	313-SEMENOLE LN GREENBAY 421 5433	D Town Utilgage Deity CAFRA BAR	4-8-11
5. Many Coull	ASTORAL Green	Town Town Town	4-0-11
6 1 1 1 1	215 5TAMOR ST M/	D Town D Village ON DOWN A ha	1 500
" alea yusa	CoRPENTING W 51/703	D Town	4-8-11
2. Konin Ja	Graph Boy WI 54313	Scity Gray By	4-8-11
8. Op Chapman	1/12 So paper	ing Town O Village Of B. O City	4-8-11
9. Marchagha Samuetter	525 /1th/ye	U Town U Village U Çiy	4-8-11
de campe Prin	5051)AU	O Town O Village O City	4.8.1
Nother reache	Certification of Circulato	r , cert	i6.
I reside at 20 9 Reliesh	erne of circulator)	<u></u>	ny.
	llator's residence - include number, street, and municipality)		
l personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective residuals (2002) 1111-1212	petition. I know that each person signed the pa	aper with full knowledge of its conter	nt on the date indicated
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GAB-170 (Rev.6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, P 608-266-8005, http://gab.wi.gov	y 93. 8.40 and 9.10, Wis. Stats. .O. Box 7984, Madison, WI 53707-7984	Page ?	··· 1983

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY Exical with whom nomination papers or declaration of candid		
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE	SENATE DISTRICT	
		or district of officeholder)	- 6C
petition for the recall of <u>DAVE HANSE</u>	(name of officeholder to be recalled and office)	ENNIE UL WI Irom	office pursuant
to Article XIII, Section 12 of the Wisconsin Co	nstitution and §.9.10 of the Wisconsin Stat	utes.	
S	TATEMENT OF REASON FOR RI	ECALL	
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required			responsibilities of
the officenolaer. Two statement of reason is required	io initiale the recan of state, congressional, teg	rstative, junicial, or county officials.)	
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THE MUNICIPALITY USED FOR MAILING	PURPOSES, WHEN DIFFERENT THAN MUN	VICIPALITY OF RESIDENCE, IS NOT S	UFFICIENT.
THE NAME OF	THE MUNICIPALITY OF RESIDENCE MUST	ALWAYS BE LISTED.	
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
1. Just Noopmann	3354 Kletus	UVillage (Tipeis Bay	3-29-11
0	364 Len Bond Por	D Town	
2. Ougan. Dry	7770200 9,000 703	D'City Corcen Bry	3-2911
3. 11	3332 Villor Way	O Town A PREIN BOWN	2/27/11
Hayary Daviers		`ख,City	0)-()(
4.	3354 Clostus	D Village / Rock	29
Carry My Con	hen Bud Drie	g(City (D)(&()())	321-11
5.1 2.1/5.1)	3314 walter way	☐ Town ☐ Village ∠:	2 27-11
COUC SOOX	6 '	Ricity (1/2-2" Ley	3 / 1/
6. In A Bread	3384 Walterway	grown Gren B	3-29-11
100000000000000000000000000000000000000	3314 Wal-ler Way	Town 0	
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114000000000000000000000000000000000000	2364 126 Barris De	□ Town /	
1° MANATANI V POVILL	1 331 1200 PX 240 191.	Village 7 / 201 Sky	3-29-11
9	3016 Waltowns	□ Town	29
- Mary S	7	Ba City Crech & CL	3-27-11
10. 7/2.	3514 Walter Wall	□ Town	3 1911
Unix all	1.9	Le City CITE 1 FEU	2 CI II
	Contification of Cinaplete	<u></u>	
1. Debra RAZO	Certification of Circulate) r , certify	
(na	une of circulator)	, **,	•
I reside at 1500 - Witte R	lator's residence - include number, street, and municipality)	, 77 <i>08</i> 0	·
		nor I know that the signers are electors	of the inviediation a
I personally circulated this recall petition and person district represented by the officeholder named in this			
opposite his or her name. I know their respective resi			
§.12.13(3)(a), Wis. Stats.	$\mathcal{A}\mathcal{A}$	Q	
3-29-11	Delera	- HOND	

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(name of officeholder to be recalled and office)

STATEMENT OF REASON FOR RECALL
(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of

We, the undersigned qualified electors of the 30TH WISCONSIN STATE SENATE DISTRICT (jurisdiction or district of officeholder)

the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

petition for the recall of DAVE HANSEN, 30TH DISTRICT STATE SENATE OF WI

MENT ACCOUNTABILITY BOARD

(official with whom nomination papers or declaration of candidacy for the office is filed)

from office pursuant

TO: WISCONSIN

GOVERNMENT

to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

	G PURPOSES, WHEN DIFFERENT THAN MUN OF THE MUNICIPALITY OF RESIDENCE MUST		SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Boards Allah	3356 Lear Box DC	Drown Drillage Drillage	3/29/11
2. Trust Clyn	332 Walke Way	O Town O Village Orcity Orce Serv	3/24/11
3/ Josnandia Kelley	3316 Walter Way	Drown UVIllage Green Perg	3/24/11
1 Amailles	2014 WITH WW	O Town O Village O City	2/29/11
5. Mil Impuis	3,54 lem Brown w, w	Orown Ovillage Scity Over Boy	3/24/1
6. Denle la College	3346 SCIRUTE: CY	O Town O Village ON ELN City	3/011
2. Hailul Loger	3352 Materney	D Town Dyllage Dylity The 11	3/201/
8. He Go What	3572 Downham Ct	o Town Village State Sta	3/24/11
9. Their Hould	- 2:16 1 = 0 d. 80 6 11021, p 10	to Town □ Village City City City	3/21/11
10. Lice Vazient	3354 LEUA BUNG Dr	O Town O Village Picity O TECH BAY	3/19/11
Dehan Prz	Certification of Circulate	or , cer	ify:
reside at 1500 Witte B	(name of circulator)	77080	
personally circulated this recall petition and personally circulated this recall petition and personal	is petition. I know that each person signed the p	paper with full knowledge of its conte	nt on the date indicat
(date)	(s) by §§. 8.40 and 9.10, Wis. Stats.	signature (Caculator)	 -

	RECALLIEITION		
to: <u>Wisconsin Governi</u>	MENT ACCOUNTABILITY (official with whom nomination papers or declaration of candid	BOARD	
We, the undersigned qualified electors of the	30TH WISCONSIN STATE	SENATE DISTRICT	,
petition for the recall of DAVE HANS	Gurisdiction of Control of Contro	or district of officeholder) ENATE OF W from	office pursuant
	(name of officeholder to be recalled and office)	nator	
to Article XIII, Section 12 of the Wisconsin (
(The reason for recall must be stated on petitions fo	STATEMENT OF REASON FOR RI or city village, town, and school district officials.		responsibilities of
the officeholder. No statement of reason is require	ed to initiate the recall of state, congressional, leg	gislative, judicial, or county officials.)	,
			<u>.</u>
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	NG PURPOSES, WHEN DIFFERENT THAN MUN OF THE MUNICIPALITY OF RESIDENCE MUST		UFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
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bousan reffecti	Pulast WI 54162 _	0 city 10 05M	4-8-11
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4. Day 18/ Oout words	Hospart VI 54155	Town Hohat	48-11
() M	WIGH CARAC	City / CU/	1 0
5. Lone Murrow	Pulaski WI 54162	O Village Angolica	4-18-11
6. Lis Blohmo	tration W.s	Town Angeloca	4-8-11
7. I Quelin	156 W Pulaski St	Town Oxivillage Ocity Pulaski	4-8-11
(S D · Opti	Pulaski WI 324 Paul SI	□ City U(4 S/C I	, , , ,
8. Brien Jurusmale	Pulash WZ	O City Culash _	4-8-11
1 De 10:20	NO308 CTY REBB	D Town DYVillage (SVerm) G (8)	4-8-11
- Will Courte	595 W. Green Balst	Town C	, , , , , ,
10. Hafi	Polaski	Village Julaski	4-8-11
	Certification of Circulate		1 - 1 - 0 - 11
1, il Appra Becht		, certify	<i>r</i> :
I reside at 905 Rallesh	(raine of circulator) (value of circulator)	80719	
I personally circulated this recall petition and personally circulated this recall petition and personal person			of the invisdiction o
district represented by the officeholder named in t	his petition. I know that each person signed the	pager with full knowledge of its content of	on the date indicated
opposite his or her name. I know their respective r	esidences given. I support this recall petition. I a	thaware that falsifying this certification is	s punishable under
§.12.13(3)(a), Wis. Stats.	$\backslash $	ant Francisco	
(date)	·	(signature of circulator)	

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.

This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984
608-266-8005, http://eab.wi.gov email: gab@wi.gov

Page No. \966

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY icial with whom nomination papers or declaration of candida	BOARD acy for the office is filed)	
We, the undersigned qualified electors of the			-
	(jurisdiction o	r district of officeholder)	,
petition for the recall of DAVE HANSE	(name of officeholder to be recalled and office)	ENATE OF WI_from	office pursuant
to Article XIII, Section 12 of the Wisconsin Co.	•	ites	
·	TATEMENT OF REASON FOR RE		
(The reason for recall must be stated on petitions for c			l responsibilities of
the officeholder. No statement of reason is required	to initiate the recall of state, congressional, leg	islative, judicial, or county officials.)	
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			<u>.</u>
	· · · · · · · · · · · · · · · · · · ·		OLINDY CIPLIE
	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
1. GON MAGENILLA	3352 Con Bone DV.	□ Town □ Village	13/19/11
Charles Olle	Bran Bay \$9311_	Total Green Spy	10/0 1/ "
2. Lin Balawin	2711 Humball Kd	☐ Village	3/20/1
000/1/01	3354 Leon Bond On	dxCity C≥165	700
3. Mell Theman	6:00 Bay 54311	O'Village GB	3/29/1
4.	3376 Doubham Court	□ Town	2.1
" Heven Boker	Green Bay 54311	O Village G B	13/29/11
5. / 100	2634 Oak wood Dr	☐ Town ☐ Village / /	alast 1
Tura Cillis	65	To City	9/24/11
6.	3316 Walker way	☐ Town ☐ Village />	3/20/1
Carelia founds	Greenlay Nt 54311	arcity 6,5	7/24/11
7. f()	3331 Wester way	□ Town □ Village	3/24/11
Linkey Williams	7714 4611 2511 A14	pacity (75)	7124/11
8. Stephanic Schellher	3718 Walter Way	O Town O Village	3/29/11
1	GB, WI G4311	Ø City	1 1 11
9. //in/1) el Fot	68, was 54311	Village 63	3/29/4
10 1	33146 WON top Was	□ Town	100111
10. (sol)	CR IN GUZII	Q Village (1)	03/29///
<u> </u>	140,001 27311		1/
. 5 1	Certification of Circulate		£.,
I, Debra fazo	ame of circulator)	, certi	ıy.
I reside at 1500 Witte ld.		080	
(circu	lator's residence - include number, street, and municipality)		
I personally circulated this recall petition and person	ally obtained each of the signatures on this pa	per. I know that the signers are electors	of the jurisdiction of
district represented by the officeholder named in this opposite his or her name. I know their respective resi	s petition. I know that each person signed the predences given. I support this recall petition. I are	paper with ion knowledge of its content in aware that falsifying this certification	is punishable under
§.12.13(3)(a), Wis. Stats.	.^ 1		
3-29-11	Debuc_	Karo	
(date)	(s	ignature of dirediator)	

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats.

This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WJ 53707-7984 608-266-8005, http://eab.wi.gov email: gab@wi.gov

TO: WISCONSIN GOVERNM	NEWT ACCOUNTABILITY fficial with whom nomination papers or declaration of candid		- -
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE	SENATE DISTR	ICT
petition for the recall of <u>DAVE</u> HANSE	EN 30TH DISTRICT STATE S	· · · · · · · · · · · · · · · · · · ·	from office pursuant
to Article XIII, Section 12 of the Wisconsin Co	(name of officeholder to be recalled and office) onstitution and §.9.10 of the Wisconsin Stat	utes.	
(The reason for recall must be stated on petitions for	STATEMENT OF REASON FOR RI		ha alliaial responsibilities of
the officeholder. No statement of reason is required			
THE MUNICIPALITY USED FOR MAILING	G PURPOSES, WHEN DIFFERENT THAN MUN	ICIPALITY OF RESIDENCE,	IS NOT SUFFICIENT.
	F THE MUNICIPALITY OF RESIDENCE MUST		
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESID Indicate Town, City, or Vil	1 0101/010
1. Brin Ment	2924 Sandie Dr _	Town Uvillage Green Bag	1 4-8-11
2 Amorti and	2924 Sandia lar	Town U Village GILIN BAU	1 4-8-11
3.8 Moreno	848 HOWARD ST	Town Globb &	5AG 4-8.11
4. K. A. KACKATOOK	1374 Day St.	Town Village Select	Eary 4-8:11
5. Suntable	724 10th	Town O Village Octity Jane	1 4/-8/11
" Brugh Shu Bost	2660 Trojan Dr.#912	O Town O Village OVER	Jay 4/8/11
1. Connin ortation	Cycle Buy Wasy	Town O Village	my 4/8/11.
8. Warret state	Green Bay W154313	Town Village Chen BAY	1 W 4-8-11
"New Genau	2364 Mi davledoc Depor LITS/10	Town Stillage (FOON BO	y 4-8+11
10. Math Blook W	WW//	Town Village	Ben 42-18
Mallon R. la	Certification of Circulate	or	
~1(17kJ ~ 1) . 1 F	arge of circulator)	90719	_, certify;
I reside at (circular	ulator's residence - include number, street, and municipality)	LOUCI	·
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.	s petition. I know that each person signed the p	aper with full knowledge of its	content on the date indicated
(date)	•	ignature of circulator)	in the factor
GAB-170 (Rev.6/2007) The information on this form is required by the Government Accountability Board, I 608-266-8005, http://gab.wi.gov email: gab@wi.gov		ľ	Page No. 1988

TO: WISCONSIN GOVERNM	NEWT ACCOUNTABILITY Pricial with whom nomination papers or declaration of candio		
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE	SENATE DISTRICT or district of officeholder)	,
petition for the recall of DAVE HANSE	•	•	n office pursuant
to Article XIII, Section 12 of the Wisconsin Co		tutes.	
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required		The reason must be related to the officia	il responsibilities of
	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		SUFFICIENT,
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. 40/130	N3471 Huy 32.	Grown Pulaski	4/8/11
2.	Palarki, wz 54162	BEVILLEGE Palaski	4/8/11
Tem 3	Polosli, wi 54162	Down 10 Village Dulaski	4/8/11
4. Sandy Bohn	817 Red Hawk Dr. PWaski W. 54162	- Town - Town - City Pulasici	4-8-11
5. Alan Okrasel	817 Red Hawk Dr.	Octive Pulaski	4-8-11
Myson Chyngl fa	PULASKI WI SYLLD	Scity PULCISIC	4-8-11
1. al Beline	ANASHI HISK 1 60 MM	D Town D Village D City D City D City	4-51
PETER J. BLOHOWICK	5197 Kunesu Rol Gran Bay, Wi 54303	Stown Pitts Ciero	48-17
"Gens Mikeofix	16157 (VCST Dr	a Town Diffield	4/8/11
10. Harry Stewen	171 William	© Town © Village Rulesh	4/8/11
1. Nathand Bed	Certification of Circulate	or , certif	·v:
I reside at 10 Rallesh	unipos (circulator). Alator's residence - include number, street, and municipality)	0,80719	· ·
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective resi §.12.13(3)(a), Wis. Stats.	ally obtained each of the signatures on this par petition. I know that each person signed the p	aper with full knowledge of its content	on the date indicated
(date) GAB-170 (Rev.6/2007) The information on this form is required by This form is prescribed by the Government Accountability Board, P 608-266-8005, http://gsb.wi.gov email: gab@wi.gov	/ §§. 8.40 and 9.10, Wis. Stats. O. Box 7984, Madison, Wt. 53707-7984	Page No	1989

TO: WISCONSIN GOVERNM	1ENT ACCOUNTABILITY fficial with whom nomination papers or declaration of candid		
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE	SENATE DISTRICT (rdistrict of officeholder)	
petition for the recall of DAVE HANSE	(name of officeholder to be recalled and office)	ENATE OF WI from	office pursuant
to Article XIII, Section 12 of the Wisconsin Co	onstitution and §.9.10 of the Wisconsin Stat	utes.	
(The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	STATEMENT OF REASON FOR RE city, village, town, and school district officials. I I to initiate the recall of state, congressional, leg	The reason must be related to the official	responsibilities of
			
	G PURPOSES, WHEN DIFFERENT THAN MUN F THE MUNICIPALITY OF RESIDENCE MUST		UFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF SIGNING
1. HENRY Long	Rural address must also include box or fire no.	Indicate Town, City, or Village Town Village Brown	4-8-11
2. Andrews	128 Johnson St Sylles	Dity Drown Drive Pulaster	481
3.	3260 S. Pinetree	D Town D Village Oneida	4-8-11
4. 21	wolle Youvine RD,	O Town	
Ken Jaumines	Known W15 54627	City Green Valley	4-8-4
Chipton	1214 Porlier S+ Green Bar W	D Town D Village Scity Treen Bar	4(-8-1(
6. Stroku Smith	18841 county pd 5	Surrown ONDSC	4-8-11
7. Allah Remi	3902 tawarack Dr Green Ban wat	U Town U Village PiHSFI U	4-8-11
8. Stee Hum	288 MAPLE AND	Dyslage Share Share	4-8-11
9. K. France	WITOS HUDG Stone	Dirown Calastri	48-1
10. John Most	PO BOX 374	D Town P Village Pulos PV	4-8-11
Malhe Rh	Certification of Circulate	or	<u>.</u>
I reside at 10 PROLEGY	warne of circulator) Color (ada ulator's residence - include number, street, and municipality)	8079 , certify	
I personally circulated this recall petition and person district represented by the officeholder named in thi opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.	s petition. I know that each person signed the p	aper with full knowledge of its content of	on the date indicated
(date) GAB-170 (Rev. 6/2007) The information on this form is required by	· ·	ignature of circulator) Page No	1600

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats. This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8005, http://gab.wi.gov email: gab@wi.gov

TO: WISCONSIN GOVERNO	1ENT ACCOUNTABILITY Official with whom nomination papers or declaration of candin	BOARD	
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE	SENATE DISTRICT	
petition for the recall of DAVE HANSE	EN, 30TH DISTRICT STATE S	or district of officeholder) ENATE OF WI fro:	m office pursuant
to Article XIII, Section 12 of the Wisconsin Co	(name of officeholder to be recalled and office) onstitution and §.9.10 of the Wisconsin State	tutes.	
(The reason for recall must be stated on petitions for	STATEMENT OF REASON FOR RI		al responsibilities of
the officeholder. No statement of reason is required	to initiate the recall of state, congressional, leg	rislative, judicial, or county officials.)	
THE MUNICIPALITY USED FOR MAILING THE NAME OF	G PURPOSES, WHEN DIFFERENT THAN MUN F THE MUNICIPALITY OF RESIDENCE MUST	NICIPALITY OF RESIDENCE, IS NOT	SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Bran Renchoushi	1397 Westrien Ave	Using Green Bay	4-8-11
2. Jun lost	218N cakler 1d ce	Dillege Green Bal	4-8-11
3. En helit	1119 Kiselside III.	D Town D Village D City City CHEMICS	4.8.11
1 and 5 kles	1137 Cherry St	O Town O Village Ocity A B	4-64/
5. Kocky Mouce	1689 Bulund PU)	O Town O Village Socity	54/303
6. Yer moue	(1	O Village Green Bay	((\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
7. Thursy Roa	1314 Bernerst.	Oronn Ovillage Green Buy	5430Z
* Illelissa Ross	113012th AUE.	Ovillege CICCHBay	154304
9. Jens Saldama	2720 Humboldt Rd,#9	O Village Green Bay	54311
16. / s	2239 Donsman	Girown a Village Benty ARCLN BAX	4/8/11 54303
1 Nathan Bed	Certification of Circulato		· · · · · · · · · · · · · · · · · · ·
I reside at UD Rallogh	m of circulator) UT (b) 9/ (ator's residence - include number, street, and municipality)	lo 80719	 ,
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective resi-	ally obtained each of the signatures on this pap petition. I know that each person signed the pa	oper with full knowledge of its content	on the date indicated
§.12.13(3)(a), Wis. Stats.	N but	Do	
(date) GAB-170 (Rev.6/2007) The information on this form is required by the Government Accountability Board, P. 608-266-8005, http://gab.wj.gov_email: gab@wi.gov	§§. 8.40 and 9.10, Wis. Stats.	gnature of Europlator) Page No	1991

TO: WISCONSIN GOVERNA	MENT ACCOUNTABILITY Official with whom nomination papers or declaration of candid		
We, the undersigned qualified electors of the _		SENATE DISTRICT or district of officeholder)	
petition for the recall of DAVE HANSE	EN, 30TH DISTRICT STATE S	•	office pursuant
to Article XIII, Section 12 of the Wisconsin Co	(name of officeholder to be recalled and office) onstitution and §.9.10 of the Wisconsin Stat	utes.	
(The reason for recall must be stated on petitions for	STATEMENT OF REASON FOR RI		l vanagusikilitian of
the officeholder. No statement of reason is required	i to initiate the recall of state, congressional, leg	rne reason must be related to the officials.) Aslative, judicial, or county officials.)	responsionines of
			
■	G PURPOSES, WHEN DIFFERENT THAN MUN F THE MUNICIPALITY OF RESIDENCE MUST		SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
1. Jam Materozak	7676 Trojen dr	O Town O Village TICEN hay	4-8-1/
2. XXXX	294 & Crussde La	Town O Village	4-8-11
3. Dann Barlon		□ Town U Uillage	4-8411
4.	1201 Bros of St Apt 3	Defity CAPPON CAC	- 1.1 - 1.1
5. COII	898 Mather Street	Town of een Itag	18 0
" Casey Hagener	0 10 1 10 10 10 10 10 10 10 10 10 10 10	greity Green Bay	4-8-11
"Kartle Nahre	5796 Leagur Chestil	XI Town Usuage DEPEYE	4-8-11
Mina Wattata	1114 (10 WL RD.	D Town	4-8-11
8.	31/2 Birdies	Town Ovillage GREN BAY	1/- 8-11
Court Lungs	10	ZLCity	11 11
"MARY SI HOU		□ Village □ Cify	
10. Eming Konyn	2660 Trojan Dr.	Drown Overn Bay Williage Skity	4-8-11
1 Matthew Bridge	Certification of Circulate	or 	,
I reside at 10 Rg WSh	arke of circulator) Color of Calco Alator's residence - include number, street, and municipality)	80719	·
I personally circulated this recall petition and person	nally obtained each of the signatures on this pap	er. I know that the signers are electors	of the jurisdiction or
district represented by the officeholder named in this opposite his or her name. I know their respective res	s petition. I know that each person signed the p	aper with full knowledge of its content of	on the date indicated
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(date)		gnature of circulator)	
GAB-170 (Rev.6/2007) The information on this form is required b	y 99. 0.40 and 9.10, WIS. SIBIS.	Page No	1007 L

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608-266-8005, http://gab.wi.gov email: gab@wi.gov

TO: WISCONSIN GOVERNM	EIVT ACCOUNTABILITY ficial with whom normination papers or declaration of candida	BCARD acy for the office is filed)	
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE (jurisdiction o	SENATE DISTRICT r district of officeholder)	
petition for the recall of DAVE HANSE	N 30 TH DISTRICT STATE SI (name of officeholder to be recalled and office)	ENATE OF WIfrom	office pursuant
to Article XIII, Section 12 of the Wisconsin Co.	nstitution and §.9.10 of the Wisconsin Statu	utes.	
S (The reason for recall must be stated on petitions for the officeholder. No statement of reason is required	TATEMENT OF REASON FOR REcity, village, town, and school district officials. It to initiate the recall of state, congressional, leg	The reason must be related to the official	responsibilities of
THE MUNICIPALITY USED FOR MAILING	PURPOSES, WHEN DIFFERENT THAN MUN	HCIPALITY OF RESIDENCE, IS NOT S	UFFICIENT.
THE NAME OF	THE MUNICIPALITY OF RESIDENCE MUST	ALWAYS BE LISTED.	
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
	Rural address must also include box or fire no.	Town City City Town	4/1/11
2. 6000 (00000	3987 Cedar Ct	Drown Syrillage Drity Summico	4-8-11
3-7-7-10 is	W301de St. Hary 156 Palaski WS4162	ATown Utilage Lassor	4/8/11
4. Tm	PO BOX 192 Polaski WI 54167	Town Willage Pulosk	4/8/11
5. It Rule	8/7 Redhank Pr	Town Pulaski	4/8/11
6. Lalon Ala Leve	178 Summet St Pulaski we sullow	Town City D Jown	4/8-11
7. Juny Ryatopherson	Pulasky	Jown Willage Pulaski	4/8-11
8. Lale Banks	Reen Bay	O Village P. H. S File L	4/8/11
2 ACROSM	1762 Barlament	Town Uyifage City	4-811
10. Susmi	387 WPW/984/87-#3	Town Pulaski	4-8-11
Matthew Brochel	Certification of Circulate	Ol'	ỳ:
I reside at 10 7 Rg Vesh	me of circulator) A VX Co O C Q O X ulator's residence - include number, street, and municipality)	, 80719	
I personally circulated this recall petition and person district represented by the officeholder named in this	s petition. I know that each person signed the p	paper with full knowledge of its content	on the date indicated
opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.	idences given. I support this recall petition. I at	m aware that falsifying this certification i	is punishable under
(date)		signature of circulator)	

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.40, Wis. Stats.

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TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY icial with whom nomination papers or declaration of candida	BOARD ocy for the office is filed)	
We, the undersigned qualified electors of the	30 TH WISCONSIN_STATE	SENATE DISTRICT district of officeholder)	,
petition for the recall of DAVE HANSE	(name of officeholder to be recalled and office)	ENATE OF WI from	office pursuant
to Article XIII, Section 12 of the Wisconsin Co.	nstitution and §.9.10 of the Wisconsin Statu	ites.	
	TATEMENT OF REASON FOR RE		
(The reason for recall must be stated on petitions for a the officeholder. No statement of reason is required to	city, village, town, and school district officials. T to initiate the recall of state, congressional, legi	The reason must be related to the official islative, judicial, or county officials.)	responsibilities of
	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		UFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF
	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING
1. m. 11	1223 St George ST	U Village	4-2-11
- Marketuras	574 70/20 San SI	Town Town	()
2. Braman Roberto		Gryfilage WULGSK	7-8-1
3. Zoen breath	205104rick Lu	o Town O(Village) PUOSU	4-8-11
4. Rich olson	735 Kancz Pr	Drillage Pulesh	4-8-11
5. Robertal RaBur	PO BOX 754	Town SE Village Pulas Ki	4-8-11
6. Jackson Ranck	4336 Annabell Circle	D Town StVillage City 1 GS/C1	44 18/1
7. Mike Risso	9015 Cty S pulaski 54167	D Town Noticity City City	4-8-11
8. // Antre	To 59 County prinsk	Drown Willage PU/05 Ki	4-8-11
5.	928 Doty 1. Jun 184 Volley	Dillage Green By	4/8/11
10. L. R. L. K. L. L. D. L.	319 Navey Lot	U Town Village Q City	48/10
All Shear B	Certification of Circulate	or	15
(NN NA-7110-1 11)	me of circulator)	and Tig	y:
I reside at	lator's residence - include number, street, and municipality)	0041	·
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective resi §.12.13(3)(a), Wis. Stats.	petition. I know that each person signed the p	saper with full knowledge of its content	on the date indicated
W-431	\ \\\\k_AA	Flan	
(date)		ignature of circulator)	

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TO: WISCONSIN GOVERNO	MEINT ACCOUNTABILITY official with whom nomination papers or declaration of candida	BOARD (cy for the office is filed)	
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE	SENATE DISTRICT r district of officeholder)	,
petition for the recall of DAVE HANS	EN , 30 TH DISTRICT STATE SE	ENATE OF WI fro	m office pursuant
to Article XIII, Section 12 of the Wisconsin C			
(The reason for recall must be stated on petitions fo the officeholder. No statement of reason is require	STATEMENT OF REASON FOR RE or city, village, town, and school district officials. I ad to initiate the recall of state, congressional, legi	he reason must be related to the offici	ial responsibilities of
THE MUNICIPALITY USED FOR MAILIN THE NAME O	G PURPOSES, WHEN DIFFERENT THAN MUN OF THE MUNICIPALITY OF RESIDENCE MUST	ICIPALITY OF RESIDENCE, IS NOT ALWAYS BE LISTED.	SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Man Wa de hear	3322 Thumpson Cot	O Town Green Bay	3/29/11
2. Kelly his	273) Lein Fairi Dr.	O Village Owan & g	3/2-1/11
3. Belisse In	3364 Somewher Con.	□ Town □ Village □ Village □ Village	3124/11
4. Primonthes Block led 10	9.0. 30x 142	□ Town □ Village □ City	1
5. Watshor Kuschel	3552 Long Rend	orown Socity Green Bald	3/29/11
6. Ell Bell	335) lean Bord	o Fown Utillage Operity	3/28/11
7. Minali Yleller	For Confestoy Cit	Orown Ovillage Diricin Bay	, 3/24/11
8. 12 1,27	3302 Thoryson CT	O Town O Village Cour Para	3/29/11
Defun Dwillius	2420 NICOLET DELVE	D Town U Village GB	3/29/11
10. July 6 2/16	2020 Micole Mr	D Town D Village City	12911
	Certification of Circulate		ute
I, Debra RAZO	(name of circulator)		tify:
I reside at 1500 Witte Ra	1. #12 HOUSTON, TK, 776 rculator's residence - include number, street, and municipality)	280-	·
I personally circulated this recall petition and pers district represented by the officeholder named in the opposite his or her name. I know their respective re §.12.13(3)(a), Wis. Stats.	his petition. I know that each person signed the p	paper with full knowledge of its conte	nt on the date indicated
3-29-11	Deline		
(date) GAB-170 (Rev.6/2007) The information on this form is require This form is prescribed by the Government Accountability Boar	d by §§. 8.40 and 9.10, Wis. Stats.	ignature of erculator)	No. 1995

608-266-8005, http://eab.wi.gov email: gab@wi.gov

	RECALL PETITION	_	
TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY I icial with whom nomination papers or declaration of candida	30ARD cy for the office is filed)	
We, the undersigned qualified electors of the	30 TH WISCONSIN STATE		
petition for the recall of <u>DAVE HANSE</u>	9	•	office pursuant
to Article XIII, Section 12 of the Wisconsin Co.		ites.	
	TATEMENT OF REASON FOR RE		
(The reason for recall must be stated on petitions for a the officeholder. No statement of reason is required	city, village, town, and school district officials. I	he reason must be related to the official r	esponsibilities of
THE MUNICIPALITY USED FOR MAILING THE NAME OF	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST	ICIPALITY OF RESIDENCE, IS NOT SU ALWAYS BE LISTED.	JFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Emby Freeman	326 5. Quinas St. #7	O Town O Village A City Graen Ban	3/17/11
2.	2357 Manitouse Rd 64311	O Town O Village Bellyeve	3/17/11
3. July & Muller	800 Rober St. Green By LT Sylvi	U Town Unlage Covery Buy	3/17/4
4. Jaser Chay	Carantsian 5430	Town - Village L-green Ben	0/17/11
5. 2/y Sq. 2	207 E MISSIGN Rd, Green Bay WE 74361	D Town UVHage Green 1349 DE City	3/17/10
6. 53 Br	GLAND, BOSHI	☐ Town ☐ Village SyCity ☐ C	3/12/
7/) 9/3 / Male/	1817 Velandi)	Town Village City	317-16
8. 1 hais Magas	1350 Klaus &	Town Of C4302	3-17-1
2 Lindal Just	Sel Howard	□ Town (0.15 □ Village 51302	3-1784
10. Pass Dula 25	1332 reber	U Town U Village U City U City	3-17-1
	Certification of Circulate		<u>. </u>
I, Richard Madril	ame of circulator)	, certify	r: Oo>>
I reside at 1065 _ 5_	A MES La Cer ulator's residence · include number, street, and municipality)	wood Colorad	<u>a 802</u> 0
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.	s petition. I know that each person signed the p	paper with full knowledge of its content of	on the date indicated
03-70-11	_ Kishard	H Madul	

GAB-170 (Rev.6/2007) The information on this form is required by §§. 8.40 and 9.10, Wis. Stats. This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 608-266-8005, http://gab.wi.gov email: gab@wi.gov

mo. 14(+	RECALLIETITION	0.000				
TO: WISCONSIN GOVERNA	MENT ACCOUNTABILITY Official with whom nomination papers or declaration of candid	BOARD lacy for the office is filed)	1			
We, the undersigned qualified electors of the _	30TH WISCONSIN STATE	SENATE DISTRICT or district of officeholder)				
petition for the recall of DAVE HANSE	EN, 30TH DISTRICT STATE S	•	office pursuant			
to Article XIII, Section 12 of the Wisconsin Co	(name of officeholder to be recalled and office) to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.					
,	STATEMENT OF REASON FOR R	ECALL				
(The reason for recall must be stated on petitions for			responsibilities of			
the officeholder. No statement of reason is required	to initiale the recall of state, congressional, leg	pisiative, judicial, or county officials.)				
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THE AGING DAY TOWN INDED	O PURPOSIO INITIONI DI PROPERTITA NA CIN					
	G PURPOSES, WHEN DIFFERENT THAN MUN F THE MUNICIPALITY OF RESIDENCE MUST		UFFICIENT.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF			
	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING			
1. Also cen kin	411 COM bardi	Section CONNUMBER	4-16-11			
2. ()	1607 Am/ 5]	Down - Cacen Bay				
Thomas Mylos		City G	4-16-11			
3. AKMI MINA	2314 MANITURA	O Town O Village O City	4/16/11			
4. Tings Work	2324 Mandhury WX	Town C1B	V-105-17			
5. 1	2223 Manitory Kds	O Town O Village Da City	4/16/10			
6.	2370 Maniforsered	Town	4/3/11			
7.	037/ 58	O Town	0.5411			
3	J/ Homenitaris	Town	W.C.			
8. Francisco Rodingon	2336 monitorock	De Village Brean Bax	4.15.11			
9. Marka vroza	2336 MONITOWORRD	O Town O Village Story 67001 Bay	475-11			
10. Mayon Needo	Haty	Oronn Village Green Bay	4-15-11			
	Certification of Circulate	or	 			
1, Kichard A Mad	111	, certify	•			
Ireside at 1065 S. Anaes St	ame of circulator) Lackground color and a ulator's residence - include number, street, end municipality)	85208	.			
I personally circulated this recall petition and person district represented by the officeholder named in this opposite his or her name. I know their respective res §.12.13(3)(a), Wis. Stats.	nally obtained each of the signatures on this pays spetition. I know that each person signed the p	aper with full knowledge of its content o	n the date indicated			
4-17-11	- TKulen	al Hillechul				
(date)		ignature of circulator)				
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	RECALL PETITION		
10: <u>Wisconsin</u> Govern	JMENT ACCOUNTABILITY (official with whom nomination papers or declaration of candid		
	• •	acy for the office is med)	
We, the undersigned qualified electors of th	(jurisdiction o	SENATE DISTRICT or district of officeholder)	
petition for the recall of DAVE HAN	ISEN 30 TH DISTRICT STATE S (name of officeholder to be recalled and office)	ENATE OF WIfrom	office pursuant
o Article XIII, Section 12 of the Wisconsi	n Constitution and §.9.10 of the Wisconsin State	utes.	
·	STATEMENT OF REASON FOR RE		
The reason for recall must be stated on petitions the officeholder. No statement of reason is requ	s for city, village, town, and school district officials. iired to initiate the recall of state, congressional, leg	The reason must be related to the officia	l responsibilities of
	LING PURPOSES, WHEN DIFFERENT THAN MUN E OF THE MUNICIPALITY OF RESIDENCE MUST		SUFFICIENT.
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. Agreemen	2021 #Dockner Aug # 705	Town Veen Bay	4/16/11
2. Pros Uplan	2021 Deckner ALL #706	O Town O Village Green Bay	4-16-11
3. Dianevant	HONDE 1202 Deckmir	Town Ulltage St City	4-16-11
4. Janes Latt	2020 Morrow ST * WS	D Town U Village DCity	4-16-11
& Donna Sati	J 2020 Marrows	He Town O Village ACity Fig. City	4-16-11
6.	ð	│ Town │ Village │ □ City	
7.		☐ Town ☐ Village ☐ City	
8.		☐ Town☐ Village☐ City	
9.		☐ Town ☐ Village ☐ City	
10.		☐ Town ☐ Village ☐ City	
7. 1 1 N .A.A	Certification of Circulate	or	
reside at 1065 - 5 Arus	(name of circulator)	lorado 8022	•
reside at 1065 - S Hrv	(circulator's residence - include number, street, and municipality)	(0, and 30 CC	· ૪ ··——-'
listrict represented by the officeholder named i	ersonally obtained each of the signatures on this pa n this petition. I know that each person signed the re residences given. I support this recall petition. I as	paper with full knowledge of its content m aware that falsifying this certification	t on the date indicated is punishable under
\$.12.13(3)(a), Wis. Stats.	Richa	01111 1-11	1
(date)	www.	signature of circulator)	

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608-266-8005, http://gab.wi.gov email: gab@wi.gov

(date)

Page No. \Op

TO: WISCONSIN GOVERNM	ENT ACCOUNTABILITY Ticial with whom nomination papers or declaration of candid-				
We, the undersigned qualified electors of the	30TH WISCONSIN STATE	SENATE DISTRICT r district of officeholder)			
petition for the recall of <u>DAVE HANSE</u>	· ·	•	office pursuant		
to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.					
S (The reason for recall must be stated on petitions for	TATEMENT OF REASON FOR RE		rasponsibilities of		
the officeholder. No statement of reason is required			responsibilities of		
			····		
	PURPOSES, WHEN DIFFERENT THAN MUN THE MUNICIPALITY OF RESIDENCE MUST		UFFICIENT.		
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING		
1. Spot willing	824 5 -6	U Town UVillage Was A(1/)	3-27-11		
2. Chelica Carl Du	3506	D Town Green BAY D Village D City C	3-29-11		
3. Come Posts	330 Canara	□Town □Village GR SaCity	3-29-11		
4. 1. 2.9	3374 Danham Ct.	D Town D Village 6	3-29-11		
5. Chiar Molect	3394 Doublem Ct	□ Town □ Village ▼City	3-24-11		
6. Parliel Socorn	3018 camous Bx	□ Town □ Village ⊠ City — ()	3-29-11		
2 King Macreishi	WALYER WAY	UTown Uvillage QCity	329-11		
8: ROOKEL RICK	CAMPUS DOX 2894 3294 N. CIRCLE DRIVE	☐ Town ☐ Village ※ City	3-29-11		
"Sarah Winter	Campus box 2763 2294 N. Circle Dr.	□ Town □ Village ⊅ Eity	3-29-11		
10. Betsy Shater	3324 Waterway	O Town O Village O College	3-29-1		
,	Certification of Circulate	or			
, Debra RAZO , certify:			;		
(circulator's residence - include number, street, and municipality)					
I personally circulated this recall petition and person district represented by the officeholder named in this					

opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under §.12.13(3)(a), Wis. Stats.

3-29-11

(date)

(signature of enculator)

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TO: Government Ac	RECALL PETITION	Wisconsin			
— ··· (Ola	CIRI MIGI CITICAL INC.	ey for the office is filed) In ict WISCON	<u>sin</u>		
We, the undersigned qualified electors of the	(jurisdiction of	district of officeholder)	•		
petition for the recall of State Sengtor Dave Hansen 30th District from office pu stant (name of office holder to be recalled and office)					
to Article XIII, Section 12 of the Wisconsin Cor	estitution and S. 9.10 of the Wisconsin State	utes.			
STATEMENT OF REASON FOR RECALL (The reason for recall must be stated on petitions for city, village, lown, and school district officials. The reason must be related to the officials responsibulities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)					
Serious, gross, neglect, of Duty, for failing to show up for work_					
THE MUNICIPALITY USED FOR MAILING	Purposes, when different than mun The municipality of residence must	icipality of residence, is no Always be listed.	O 1 OUREACTION		
THE NAME OF	THE MUNICIPALITY OF RESIDENCE BIOST STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	E DATE OF		
SIGNATURES OF ELECTORS	Rural address must also include box or fire no.	Indicate Jovo, City, or Village	SIGNII 3		
1. Dandi Blaner	Suamice w/54	D TOWN CO WELLE CO	4/5/11		
2 Youl Stuckart	Suamico WI 54173	Different Sticimuction of the state of the s	4-5-11		
3. Rayon Martich	14565 VEU 5 VAMICO WI 54/73	D Village SUMMUD	4-5-11		
43	Sname w ht 54173	OCH THEM TOWN	4/5/4		
5. MEKLASSENBERGS	2876 SEAFARER SUMMICO WI	DVIIIage DCky SUAMICO	4.5.11		
6. Don Barward	Buanico Wt	O Town O Village Sucmic D O City	4.5-11		
Ran Sapresta	133/ Nortues Ri	DITOWN S Varies DICRY	4-5-11		
3.0mm.Qu	2241 WILDWOOD Pa	Driving Suamico	4-5-11		
9.		Cl Town Cl Villago Cl City			
10,		CL Town CL Village CL City			
Certification of Circulator centify:					
I reside at 2 800 & Mac of circulators Ad Green 1904 WI 54313					
I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the Jun scietion or					
opposite his or her name. I know their respective residences given. I support and recompensation					
S. 12.13(3)(e), Wis. Stats.					
	Herry	(senature of circulator)			
EB-170 (Rev.7/2003, page no. box added 8/2005) The information on this form is regulated by Ss. 8/40 and 9/10, Wis. Stats. This form is prescribed by the State Elections Board, P.O. Box 2971, Medison, Wt. 53701-2973 608-266-8005, http://elections.state.vvius					